THE BIRTH OF INDIVIDUAL PSYCHOLOGY IN ENGLAND, 1870-1939

Nikolas Simon ROSE

Thesis submitted for the degree of PhD

University of London

Institute of Education

JANUARY 1984

ABSTRACT

This is a study of the formation of the psychology of the individual in England in the period from 1870 to 1939. The psychology ofthe individual was a scientific discourse and body of practices which had as its object the mental capacities and attributes of individuals. It concerned itself with the assessment, causes and consequences of the variation of these capacities and attributes among individuals. It formed and was deployed within a range of practices concerned with the identification and administration of pathological individuals and sought to become an autonomous clinical practice in respect of them. The study uses a method based upon Michel Foucault's 'archaeological'studies of the human sciences. It identifies the theoretical and social conditions for the formation of individual psychology and describes its conceptual structure, social existence and strategic functioning. The psychology of the individual was founded on the belief that socially desirable qualities in the population were distributed according to the incidence of statistical variations in large populations. It formed in England around a problem of defective mental capacities. The study describes the conceptions of social regulation and individual character within which such a problem emerged. It describes the psycho-eugenic strategy in which individual psychology operated, and the reasons for its defeat by a neo-hygienist medical strategy. A new problem of maladjusted and delinquent children emerged which was conceptualised by a 'new psychology' as arising from disturbed emotional relations in the family. This operated in a new site, the Child Guidance Clinic, in alliance with social workers in a psycho-social strategy. But individual psychology remained subordinate and failed to become a clinical instance in its own right. This was, in part, because of the way in which it conceptualised normality and abnormality.

TABLE OF CONTENTS

ACKNOWLEDGMENTS

This work has taken a long time to bring to some sort of a conclusion, and in the course of it I have incurred many debts. I owe most to the many other works of research, scholarship and analysis which I have plundered so unceremoniously in constructing my own account, no doubt distorting their arguments to suit my own ends. These other texts are the conditions of possibility for my own; their specific contributions are evident on every page. The work was carried out under the auspices of the Department of the Sociology of Education at the University of Education where, from 1975 to 1978, I was the recipient of a grant from the Social Science Research Council.

Tony Green has shown patience and good humour as my supervisor over the many incarnations of this study, and has constantly encouraged me to justify my premises and methods. Graham Burchell and Colin Gordon talked to me at a very early stage in the work, and enabled me to think of the form which it should take. Anna Wynne helped enormously, by putting much of the text onto a word processor when time was short. Hilary Allen read all the drafts at least once, and with great care and kindness showed me where spelling, grammar and argument went astray. Diana Adlam has discussed psychology with me over many years and in many ways, helped me clarify my arguments and made me feel this work had some interest when I had lost all sense of it. To my other friends who suffered some of the burden of this study, my thanks; I am sorry to disappoint your expectations.

INTRODUCTION

> In studying the psychology of the individual, sleep, madness, delirium, somnambulism, hallucination offer a far more favourable field of experience than the normal state. Phenomena which in the normal state are almost effaced because of their tenuousness appear more palpable in extraordinary crises because they are exaggerated ... human psychology will have to be constructed by studying the madness of mankind, the dreams and hallucinations to be found on every page of the history of the human spirit.
>
> Ernest Renan, 1890[1]

Since the end of the Second World War, psychological expertise has been increasingly deployed with respect to a range of practical problems and within a large number of administrative and reformatory practices. Psychological agents and techniques are involved in assessment and diagnosis of problems of individual conduct in institutional sites such as hospitals, schools, prisons, factories and in the army. They are frequently responsible for recommending treatments, and often for carrying them out. And an analogous range of psychological specialisms have arisen - clinical psychology, educational psychology, criminal psychology, industrial psychology, military psychology and so forth. How is one to account for the emergence and functioning of these new knowledges and techniques for the conceptualisation, regulation and amelioration of the problems of individuals in their personal and social lives?

If one reads the authoritative histories of psychology, these

developments are grouped together under the rubric of applied psychology. Psychology is considered to be fundamentally the science of the normal mental functioning of human beings, and the accounts of the origins of the modern psychological enterprise are constructed in this light. The roots of psychological modernity appear to be traceable through a long tradition of reflections on the human psyche, stretching back across the span of written history. Anything which has been said about the human mind can form part of such a history, of which our modern science of the mind is the inheritor and culminator. A history which takes as its organising principle the normal human mind can order the texts it examines along a continuous path, in terms of the extent to which they grasped, enabled us to grasp, or were obstacles to the grasping in thought of this real object of knowledge.

Considered from this perspective, the social deployment of psychological expertise can only be seen as a by-product, often unexpected and unintended, of the advances of our knowledge of the functioning of the normal mind and its role in behaviour. Thus the various aspects of psychology which concern themselves with practical and technical questions can be conceived of as the application to specific problems of the knowledge gained in the study of the normal mind. The flow of psychological truth is from the centre of normality to the periphery of application. And the practical issues with which psychology as a social practice is bound up are thus pertinent only to this low status penumbra of applied psychology; the central core of psychological discourse has a history which is indifferent to them.

Even where it is allowed that there are links in this field of 'application' between social questions and psychological developments, these concern only the pressing need to derive useful

techniques from our knowledge of psychological normality. Whilst it is indeed the fortunate status of psychology to be enlivened by, and relevant to, questions of everyday life, its status as a knowledge is independent of them. Thus if the constitution of psychology as a scientific discipline was quickened or even induced by certain practical problems, even if it allowed of an application of this scientific knowledge to certain technical tasks, it was nonetheless an occurrence in a pure theoretical space, in which a union was achieved at last between a discourse motivated only by a desire to know and its object, the human individual, which pre-existed it and awaited it.

So if, in this practical field, psychology has been chiefly concerned with problems of pathology, of those who, for some reason are failing to function normally, it is implied that psychology can recognise and diagnose such pathology because of the knowledge which it already possesses of the normal mind. A knowledge of normal mental processes thus appears to be the condition and basis for the application of scientific techniques to the problems posed by abnormality.

A line of development, then, from the past to the present; from the normal to the abnormal; from an understanding of normality to an ability to recognise abnormality and hence utilise that knowledge; and, at this stage only, the incidence of social concerns upon the field of deployment of psychological expertise.

The present study contests such an analysis. Modern scientific psychology in England was not born in the quiet and reflective atmosphere of the academy. The place now occupied by psychology within the practices of social administration and regulation has not been established through the application of established psychological

doctrines to pressing practical problems. Nor have we seen a knowledge of the normal mind turned to account in the understanding of pathology. If anything, the issue is more usefully posed the other way round. The conditions which made possible the formation of the modern psychological enterprise in England were established in all those fields where psychological expertise could be deployed in relation to problems of the abnormal functioning of individuals. The investigation which follows seeks to describe these conditions, which made it possible for a positive science of the human individual to form in England in the period from about 1870 to about 1939. The function of this Introduction is to outline the approach which will be adopted, the structure of the study, and its rationale.

Most histories of psychology trace the roots of psychology back through a continuous series of speculations about the mental life of humans from time immemorial. Yet there is also a common acceptance that something significant occurred in a period from about 1875 to about 1925. Both from the standpoint of the historian, and that of contemporary participants, something appears to happen over this fifty year period, in Britain and Western Europe as well as in the United States, which has the character of an 'event'. This event appears to consist of the translation or extension of certain recurrent questions about the nature of humans from the closed space of philosophy to a domain of positive knowledge: the formation of psychology as a coherent and individuated scientific discourse.

Obviously there is nothing definite about the boundaries of this period of transition: they can be drawn differently according to the criteria brought to bear upon the texts and documents which make up the historical record. Nonetheless one can trace over this period a shift within the organisation of disciplines in the universities, and the progressive institutional delineation of psychology from

philosophy and logic on the one hand and from biology and medicine on the other. One can see the establishment of institutions and departments specific to psychology - psychological laboratories for example. One can see the formation of groupings of individuals who identify themselves as psychologists, who are trained by psychologists and who have qualifications as psychologists. And one can observe the establishment of a professional apparatus of psychology - associations which constitute a specifically psychological community, with its own rules and traditions for designating who is competent to make psychological statements, what are appropriate objects to speak of and in what ways, and a network of psychological journals which operationalise these rules in their criteria for selection of articles for publication, and reconfirm them through the nature, as well as the results, of the psychological research which they disseminate.

Thus it was in 1879 that Wundt obtained permission to use one small room at Leibzig for the novel purpose of a psychological laboratory. In England, under the influence of Alexander Bain, a journal entitled Mind appeared in January 1876, declaring itself in its opening editorial "the first English journal devoted to Psychology and Philosophy" and setting itself no less an aim than "to procure a decision as to the scientific standing of psychology" James Sully, Grote Professor of Philosophy of Mind and Logic, established the first English laboratory for experimental psychology at University College London in October 1897, and in the same year a similar laboratory was founded in Cambridge. In October 1901 the British Psychological Society was inaugurated, in 1904 the British Journal of Psychology first appeared - the list of similar developments could be considerably extended.[2]

Yet, as Hearnshaw points out in his Short History of British Psychology, the subsequent growth of academic psychology in Great Britain was remarkably slow. At the outbreak of the Second World War there were only six university chairs in psychology, and a total lecturing staff of about thirty. The central subject matter of university psychology, the science of mental life, was consciousness or experience. Philosophers disputed psychology's claim to this domain, and psychologists disagreed as to the merits and demerits of different theories. But the analysis of the conscious experiencing self defined the space of controversy and its principal terms. However Hearnshaw argues that the impetus for the development of psychology in England did not come from this field of questions and debate. It came, rather, from all those social fields where psychology was deployed - in particular, medicine, education and industry. "Here indubitably, and beyong the boundaries of philosophical controversy, progress was being made, new disciplines were being forged, new professions created. The academic world could not indefinitely refuse to recognise these developments."[3] It was outside the academy that the claims to truth which psychology made were first recognised, it was here that psychologists first gained social recognition, professional status and a practical role, it was this that powered the lift-off of psychology in the post-war period.

Now the psychology which began to establish itself in these social apparatuses prior to the Second World War characterised itself in a particular way. Its proponents termed it 'the psychology of the individual' and claimed that if psychology was to become a scientific discipline it must become a science of the individual.[4] The psychology of the individual had as its object, not the general laws of functioning of the human psyche, but the specific mental capacities and attributes of human individuals. It particularly

concerned itself with the variation of these capacities and attributes among individuals and the causes and consequences of such variations. The psychology of the individual was, that is to say, a psychology of individual differences, of their conceptualisation and their measurement, of the interpretation of pathologies of conduct in the light of them, and of the prognosis of future conduct in terms of them. A psychological science of the individual emerged through this act of differentiation and quantification. The objects and problems around which the psychology of the individual formed were not, however, produced in the laboratory or in the study. They were those prioritised by the objectives and mode of functioning of particular social practices and institutions themselves. The school, the reformatory, the court, the army and the factory were the surfaces upon which emerged the new objects which individual psychology sought to make its own. The problems which these objects posed for the functioning of these apparatuses set the conditions which would have to be fulfilled if there were to be a socially effective science of the individual psyche. It was not a question of external stimuli to the development of knowledge. The conditions which made individual psychology possible established the issues to be resolved, and the functions which its techniques would have to fulfil: they set the terms which individual psychology would have to abide by if it were to establish its claims to truth. And the psychology of the individual claimed that its concepts and techniques <u>were</u> appropriate to deal with the problems posed for social apparatusses by dysfunctional conduct - to understand, to diagnose, to prescribe and to carry out treatment.

Further, the objects around which individual psychology formed had one thing in common - they were phenomena deemed to be

pathological. Psychological knowledge of the individual was constituted around the pole of abnormality. Far from knowledge of the pathological being an unlooked for and advantageous consequence of a science seeking only a knowledge of the normal, the opposite is closer to the truth. No doubt it would be too much to claim that psychology's conception of the normal is in general construed as no more than the absence of abnormality. But it is certainly the case that practices whose object was the identification and administration of abnormality were more than merely external conditions for the development of the psychology of the individual. They also allowed the normal to be construed as <u>that which did not need to be regulated</u>. Normality was thus conceived of as merely a lack of socially disturbing symptoms, or an absence of social inefficiency. And this particular form of the division normality/pathology is a constitutive feature of modern psychological knowledge of the individual. Both the strengths and the weaknesses of individual psychology were inscribed within the notions of normality and abnormality which constituted it.

To understand the psychology of the individual in this light enables us to place its emergence as a scientific discourse, not within a history of reflections upon the nature of the soul, but within the changing conceptions of pathologies of thought, belief, intellect, emotion and conduct. It is to these conceptions and the practices of government, regulation, surveillance, segregation, and therapy within which they were deployed, that we must look if we are to begin to identify the conditions which made such a psychology possible. Not a history of ideas, then, but a history of practices, techniques, institutions and agencies, of the forms of knowledge which made them thinkable and which they, in their turn, transformed. And a history of the categories and problems around which such

complex apparatuses formed, which provided the motivation for their emergence and the targets of their tactics. The feeble-minded individual, the shell shocked soldier, the inefficient worker, the maladjusted child, the juvenile delinquent - no doubt these are simply the ones which have been most obvious in this particular study.

To trace the emergence of the formation and functioning of this type of psychological knowledge from such a perspective is to introduce discontinuity into the history of psychology. Where the standard histories see a progressive evolution of knowledge from past to present, we can now discern radical shifts, the elimination of certain themes, the rise and decline of others, the eruption of new questions from unexpected quarters. We can, for instance, both appreciate the significance of the issue of the feeble-minded for about three decades at the turn of the nineteenth and twentieth centuries, and understand why it is that the debates around this problem are so foreign to our contemporary concerns with the mentally handicapped. We can no longer trace a single line through all those discourses which address the mental functioning of man, for the development of the science of psychology is no longer ordered around the apparently reassuring stability of the normal human psyche. We now seek the conditions for the formation of the psychology of the individual within a history of the emergence and transformation of concerns over the pathologies of mind and conduct and their consequences.

But if such an approach implies that we cannot so easily relegate the social conditions within which psychology emerged and functioned to a domain external to that of its concepts and theories, we must also avoid committing the opposite error. Psychological

knowledge of the individual was no mere function or effect of its social conditions. There were specifiable discursive conditions for the ways in which social problems were conceptualised at particular times, the measures which were directed towards them, the evidence gathered as to the consequences of such measures and the conclusions drawn. These discursive conditions were neither effects of political imperatives or social objectives, nor the consequences of the class positions or interests of the theorists involved. It is misleading to perform any such reductions, for they involve flattening out the multi-dimensional discursive space within which particular modes of conceptualisation became possible. The scientific discourse of individual psychology did not form in a pure space of knowledge, but neither was it called into existence through the force of social exigencies.

In order to clarify this point, it is necessary to consider what is implied in designating the psychology of the individual a <u>scientific discourse</u>. The term <u>discourse</u> designates a body of statements for which a regular and systematic pattern of organisation can be described. If a body of statements forms a discourse it will be possible to identify a number of rules of formation, succession and derivation for these statements. These rules will be such that one can specify the conditions which a particular statement or group of statements will have to fulfil if they are to be part of this discourse.

Individual psychology is a discourse of a particular type: a scientific discourse. I class a discourse as scientific on the basis of two criteria. Firstly, scientific discourses are <u>theoretical</u> in character. They are systematic organisations of statements which purport to name, analyse, classify and explain particular phenomena. Theoretical discourses may be described in terms of the rules which

govern this activity of naming, analysis, classification and explanation. In the present study, we will pay particular attention to the way in which objects for analysis are specified, and the systems of conceptualisation which produce classifications, define a domain of relevant evidence, and establish what is to count as an explanation. The terms in which one may carry out such a description are distinct from those in which an evaluation of such a discourse may be conducted.

The second criterion for a scientific discourse is that it is truthful. Scientific discourses seek to produce explanations that are true, contain means by which that truth is demonstrable, and deploy and evaluate statements in terms of a division between the true and the false. Their systematicity is regulated by this fundamental relationship with truth, and that systematicity establishes the conditions which theories and explanations will have to fulfil if they are to be 'in the true'. To characterise a scientific discourse as truthful is not to imply any commitment to its epistemological status. For the present analysis the point is not that scientific discourses are true, or that some are truer than others, but that they seek truth, establish criteria for what is to count as truth and contest among one another according to the opposition between truth and error.[5]

To the extent that individual psychology is a systematic and describable body of statements which has a theoretical character and which is regulated by a norm of truth, it is a scientific discourse. But scientific discourses do not only <u>seek</u> truth, they also <u>claim</u> truth. The extent to which a scientific discourse can establish its claims to truth, can command acceptance of the veracity of its explanations of certain phenomena, is crucial for the relations which

can obtain between that discourse and the various social practices within which it circulates. Firstly, within the field of scientific practice itself. But furthermore within the various other practices - technical, judicial, pedagogic, governmental and so forth - within which that discourse or the explanations which it produces may be deployed. The social functioning and consequences of the psychology of the individual were conditioned by the ways in which its explanations laid claim to truthfulness and the extent to which their veracity was accepted.

So a study of the emergence of the psychology of the individual will have to consider not only the conditions for the formation of the problems around which such a scientific discourse formed, but also the internal organisation of that discourse, the ways in which it sought to establish its claims to provide truthful explanations of these problems and the arguments and disputes within which these truth claims contested others. But, as we have seen, the psychology of the individual existed as more than merely a set of arguments and explanations of problems embodied in books, articles, reports of experiments and so forth. It also consisted in a set of practical instruments and techniques which embodied the explanations proposed and deployed them in relation to the practical problems which had occasioned them. A whole technology was constructed, consisting in manuals of instruction, testing and assessment procedures, rules of diagnostic practice and classification, techniques of therapy and reformation. These practices were carried out by agents designated competent to pronounce the explanations of the psychology of the individual and to utilise its practical skills, by virtue of their training, qualifications and experience. These psychologists sought to locate problems of individual conduct within the jurisdiction of the psychology of the individual, and hence to claim the right to

adjudicate upon them. They formed professional bodies to designate who was competent to speak and practice as a psychologist, to control teaching, training and admission to the ranks of the professionally qualified, to regulate standards of professional conduct, and to give voice to the claims of psychology as a professional instance.

This study thus seeks to chart the conditions for the emergence of the psychology of the individual as a scientific discourse and a body of social practices organised around problems of individual pathology which were theselves constructed through the functioning and objectives of various social apparatuses. It was the existence of this psychology - as a complex of discourses, practices, agents and techniques, deployed within schools, clinics, the judicial and penal processes, the factories and the army - which provided the basis for the generalisation and development of 'applied' and 'clinical' psychology during and after the Second World War. For it had become possible to think scientifically about the mental capacities and attributes of human individuals, to understand their conduct in these terms, to conceive of their problems and potentials in terms of these psychological capacities, and to construct techniques of regulation and reformation with reference to this psychological domain.

The structure of the study

This is a lengthy study, and it ranges over a large body of material. For reasons which will become clear in our discussion of methodology, it also does not follow a linear chronological path. Material from the same period is discussed in different contexts in different chapters; additionally some chapters link together events and texts from dates and times which are far apart. It is hence not, in any conventional sense, a history. A brief overview of the route which we will travel may thus help to provide the reader with some guidelines as to the order of exposition and its rationale.

The first two chapters are theoretical and methodological. In the first we consider critically some current approaches to the history of scientific discourses. The training of psychologists usually involves an introduction to the history of their discipline through a number of 'authoritative' texts - weighty tomes, usually written by psychologists themselves, which trace the development of psychology from its origins in the speculations of the ancients through to its modern scientificity. We examine the problematic assumptions which underpin such histories, their implications for our conception of the nature and determinants of psychological discourse, and the function of such histories within psychology itself.

If these texts are usually written in a triumphalist fashion, celebrating the freeing of knowledge from prejudice and illusion, sociological studies have turned a more jaundiced eye upon the history of sciences in general and the human sciences in particular. One influential approach seeks to show that the conditions in which sciences emerge, and their theoretical content itself, as well as the lines of dispute and the positions of groups within such disputes, can be explained sociologically. This explanation is carried out in terms of the social interests and goals of scientists, which are

themselves regarded as the product of the social positions which scientists occupy. A further current trend of sociological thought sees the historical development of the human sciences as part of a process of rationalisation and medicalisation of social control. In this process socially troublesome individuals and groups are increasingly dealt with by apparently neutral scientific experts. They use the supposed scientificity of their knowledge and expertise to legitimate politically motivated ways of ensuring the smooth running of the social order. The critical discussion in this chapter shows how the methodological approach of such sociologies makes it impossible for them to ask, let alone answer, important questions about the emergence and social operation of the human sciences.

The second chapter outlines an alternative approach which is adopted in the present study. Michel Foucault has conducted a number of studies of the formation and functioning of the human sciences. He has termed these analyses 'archaeological' and 'genealogical'. This chapter demonstrates the utility of archaeology in conferring intelligibility upon the emergence and deployment of the human sciences, describes the analytic procedures employed, and differentiates archaeology from the less satisfactory genealogical approach. Archaeology does not form a systematic analytic machine for 'application' to particular domains; the present study utilises it as a set of conceptual tools which, together with equipment borrowed from elsewhere and a few home-made devices, provides the means of putting together an analysis of the emergence of the psychology of the individual as a discursive practice. Such analyses are susceptible to rigorous evaluation, and the chapter closes by suggesting the terms in which such an evaluation may be carried out.

Whilst the bulk of the study deals specifically with events in

England, the third chapter has a different function and a different focus. It considers the characteristics of the conception of a specifically psychological subject which emerged in the nineteenth century, and which allowed the formation of a psychological notion of individual variation. The study utilises the debate in France at the beginning of the nineteenth century over the 'Wild Boy of Aveyron' - a feral child who became the object of considerable controversy - to examine this conception. This debate provides a context within which the parameters of such a conception can be displayed. It entailed the emergence of a notion of a 'moral' domain, internal to the subject, which organised conduct, within which pathologies could arise, and to which treatment should be directed. This discussion also allows us to examine conceptions of one particular form of pathology - idiocy - in the nineteenth century. This is relevant because individual psychology was born in England in a shift in the way in which defects of intellect and their consequences were construed.

The central portion of this study, Chapters Four to Seven, considers these events. The psychology of the individual took shape in England around a problem of defective mental capacities. From 1869, when Francis Galton published Hereditary Genius, up until 1913, when Cyril Burt was appointed 'the first official psychologist in the world', it concerned itself with the measurement of the intellect, with the consequences of intellectual defect, and with the procedures which should be adopted for ascertaining and dealing with defective individuals. The social problem of defectives - their prevalence in the population, their effects and how to minimise them - was seen as an appropriate object for government concern and action. Chapter Four sets the scene for the detailed archaeological examination which follows. It examines the emergence and transformation of conceptions

of the population in political and social discourse, and how its regulation became a proper object for government and administration. It demonstrates that, in the late nineteenth century, strategies of social regulation constructed a problem of population in terms of a danger of its progressive deterioration. It shows the relationship between these concerns and the emergence of a notion of degeneracy in theoretical texts on mental pathology. Chapters Five and Six discuss the emergence of eugenic arguments, which combined analyses in terms of natural selection with a particular theory of heredity and a statistical conception of the population. These transformed the way in which the problem of degeneracy was conceived. A group termed the 'feeble-minded' came to occupy a central place in these debates, as a potent threat to the future quality of the population, and it was argued that there was an urgent need to discover them and prevent them from proliferating.

It was within these eugenic arguments that the psychology of the individual was established. Chapter Seven considers the theoretical conditions which allowed the formation of a distinctively psychological conception of intelligence and its measurement, based upon a particular statistical conception of the distribution of variation in the population. Individual psychology was founded in the belief that socially desirable qualities in the population were distributed according to statistical conceptions of the incidence of variation in large groups, and hence that these qualities could be conceptualised and assessed on the basis of a symmetry between statistical and social norms. The psychological conception of intelligence and its assessment was predicated upon this assumption. We consider the construction of techniques for the assessment of intelligence in relation to this, and the formation of a 'psycho-

eugenic' strategy wherein individual psychology claimed to be the appropriate expertise to handle the issue of feeble-mindedness. This claim was largely unsuccessful, and medicine extended its dominion to these new problems; we explain why this was the outcome.

The success of medicine was bound up with a shift in medical strategies themselves. Throughout the nineteenth century, medicine had construed social problems and its role in combatting them in terms of hygiene. It promoted - and was the beneficiary of - grand schemes of environmental reform - efficient sewage disposal, pure water, air and food and so forth - and regarded social ills as a consequence of the effects of environment on largely passive and receptive bodies. In the early years of the twentieth century its strategy changed. The 'neo-hygienist' strategy sought to promote health as a positive value, through acting on the habits of individuals and families - ways of cooking, washing, cleaning, coughing, spitting and the like. In the early decades of the twentieth century, this strategy was directed to the problem of infant mortality, which became a major concern. Chapter Eight considers this strategy, why it became socially effective whilst psycho-eugenics was marginalised, and the conceptions of the family and techniques of its regulation which developed within it. Neo-hygienism was the rationale for the development of infant welfare clinics, health visitors and a peculiar amalgam of statutory and non-statutory 'welfare' practices and agencies which began to fill out the space between the details of home and family life and the objectives and expectations of government. The 'welfare' work which developed consisted primarily in co-ordinating the various agencies which impinged upon families, and in providing advice on household management and child rearing. It acted upon mothers in order to utilise the home and family as a mechanism for the construction of

physical health and sober habits amongst family members, especially children, with a view to averting the problems which poor health and bad habits would lead to in the future.

Neo-hygienist conceptions could also be applied to mental health, and when they were, a new set of problems amenable to social regulation emerged. It now appeared that major mental disturbances in adults - leading to crime and social inefficiency as well as to insanity - had their origins in minor and apparently inconsequential disturbance of emotion and conduct in childhood, which were themselves the product of family problems. This argument allied itself with one which was emerging in the newly formed Juvenile Courts - that juvenile delinquency was not so much a bad act as a manifestation of mental or emotional disturbance. One now had a spectrum of troubled and troublesome children ranging from the child with temper tantrums, through the school truant to the young thief. The solution to all these problems was early treatment of children and reformation of the family. The Child Guidance Clinic was a specialised site for the organisation of these new measures. A new problem had formed - the maladjusted or delinquent child - alongside that of feeble-mindedness - which individual psychology sought to make its own.

Chapters Nine and Ten demonstrate that these new problems entailed a shift in the way in which the problems of childhood were conceptualised, and hence also in the strategies of intervention and regulation which were promoted. The most significant way of understanding these issues was that put forward by the 'new psychology', which combined arguments from psychoanalysis and from psychological theories of the instincts to propose that childhood disturbances resulted from problems in the emotional relations of the

family, which caused failures of adjustment. These came from the blocking and repressing of instinctual energy, instead of it being chanelled in socially useful directions. The psyche became a sort of internal representation of the family, and the family became a domain of psychological relationships. The new psychology allowed the development of a normalising strategy of intervention into families because of the way in which it linked up personal contentment, psychological health, family feelings and social adjustment. It provided the rationale for the type of child guidance work done in England in the thirties. It also allowed for the transformation of the old type of 'welfare worker' into a new 'social worker', who could assume a directly therapeutic role by acting on the disturbances in the emotional and psychological economy of the family which were considered to lie at the root of childhood problems.

But paradoxically this new psychology was mainly espoused by doctors, and doctors maintained the role of direction of the clinics and of diagnosis and therapy with children. This was not simply an effect of medical hostility and jealousy of its clinical privilege. It was partly because of the acceptance of the claims of doctors that only they had the expertise to differentiate between disturbances caused by physical, mental or social conditions, and to assess the relative weight to be assigned to different factors. But it was also a consequence of the means of conceptualisation that constituted individual psychology, for this impelled it to try to ground its understanding of these new problems in terms of a conception of temperament which could be assessed and evaluated in the same manner as intelligence. It searched for an objective technique to test temperament, a technique which would enable the normality or abnormality of any individual to be ascertained by seeing their relationship to population norms. It had little success in England,

in the period under investigation, developing an analogue of the intelligence test to use in the diagnosis of maladjusted and delinquent children, and offered few alternative techniques. The very conceptions of normality and abnormality which had made individual psychology possible played an important part in limiting its ability to attain a clinical status before the Second World War.

Two further points should be made in introduction. Firstly, this study neither seeks nor pretends to provide an exhaustive account of psychological happenings in England from 1870 to 1939. There were certainly many questions raised in academic discussions whose relationship to the concerns, methods and theories of individual psychology was tenuous. In addition, there was one very significant area of 'applied psychology' in England during and after the First World War which is barely touched upon here. This concerned the psychologisation of problems of industrial organisation and efficiency, carried out in the Health of Munitions Workers Committee, the Industrial Fatigue Research Board and the National Institute of Industrial Psychology. This was one of the most substantial fields for the employment of psychologists at this time. Questions raised in psycho-physiology were tranformed in this set of concerns, and new questions were posed concerning the psychology of sensation, discrimination, attention and co-ordination in relation to industrial fatigue and accidents, industrial training and skills and the technical organisation of the production process. A large proportion of papers to the psychological journals were directly or indirecly indebted to this work.

Questions of individual differences certainly did emerge in relation to the psychology of industry, in particular the issues of

job selection and vocational guidance. But by and large, the new means of conceptualisation which constituted the psychology of the individual were forged in relation to the problems of social life rather than industrial labour. In order not to further burden an already overlong study, the psychologisation of production has been considered only where it is essential to the intelligibility of the birth of the psychology of the individual. The principle of selection which has guided this study is this: In what ways, and with what consequences, did it become possible to think psychologically about the variations of capacities and attributes amongst individuals?

Finally, to avoid misunderstanding, I must point out that this study is not a critique of the psychology of the individual. It is not written in favour of one sort of psychology as against another sort of psychology, nor against psychology and in favour of the absence of psychology.[6] It does not seek to show the falsity of individual psychology, nor to discredit it by revealing its association with discreditable social interests or political ideologies. The study simply seeks to uncover what made it possible to think psychologically about individual differences, how this was connected up with other social, political and theoretical events, and what this psychological individualisation, in its turn, permitted.

NOTES TO INTRODUCTION

1 Renan [1890] 1923, quoted in Canguilhem, 1978, pp 14-15.

2 Hearnshaw, 1964, is the best general account of the history of English psychology.

3 Ibid, p 211.

4 This psychology also termed itself 'individual psychology, and the present study also uses this term. However it should be pointed out that the phrase 'individual psychology' was appropriated in the 1920s and 1930s by Alfred Adler and his followers to designate his particular doctrines. Except where specified, the present study does not use the term in that sense.

5 This discussion is dependent upon the work of Georges Canguilhem and Michel Foucault which is discussed in Chapter Two below.

6 In using this formulation I am deliberately allying myself with the remarks made by Michel Foucault at the close of the preface to his study of medicine, The Birth of the Clinic (Foucault, 1973, p xix).

CHAPTER ONE

THE HISTORY OF PSYCHOLOGY AND THE SOCIOLOGY OF SCIENCE

The object of this chapter is critically to examine some different approaches to the analysis of the history of scientific discourses which are pertinent to the study of the history of individual psychology. The discussion which follows will be in three parts. I will first consider the approach adopted in the 'authoritative' histories of psychology - those weighty standard texts, usually written by psychologists themselves, a knowledge of which is considered a necessary part of the training of those who would wish to be psychologists. Second, I will consider some recent work in the sociology of science which advocates the study of scientific discourses according to a 'strong programme' in which sociological explanations are applied not only to the circumstances of emergence and deployment of scientific discourses, but also to the internal organisation of theories and the positions taken up by individuals and groups in scientific disputes. Thirdly, I will briefly discuss some recent analyses of the history and functioning of the human sciences in terms of 'social control' and 'the medicalisation of social control. In the chapter which follows I will discuss Michel Foucault's analyses of the history and functioning of scientific discourses in terms of 'archaeology' and 'genealogy' and indicate the approach to be adopted in the present study.

The production of a sanctioned history

> Psychology has a long past but only a short history.
>
> Hermann Ebbinghaus [1]

The standard histories of psychology - for example Boring, Brett, Murphy, Flugel [2] - tell a tale which might appear convincing, if only because of the frequency with which it is repeated. Man, and the mental life of men have always, it would appear, been objects of fascination for the inquiries of philosophers, intellectuals and savants, and yet for many hundreds of years their deliberations contained little that might count as scientific knowledge. Over these centuries two broad paths may be distinguished, in whose convergence are to be found the origin of our modern scientific psychology. On the one hand there is a path traced through the speculations of philosophers, probably as old as humanity itself but dating back at least to the times of Plato and Aristotle. This concerned the nature of the human soul; it approached the question of a knowledge of the human mind through a rationalist metaphysics. Despite its insights, despite the occasional flash of inspiration or genius, a series of recurrent and misleading oppositions precluded the development of any genuine understanding of the human mind. Mind versus body, for example, with its alternative 'solutions' of innatism or parallelism. Faculties versus associations, with its related problems of essentialism versus empiricism. The age-old opposition between activity and structure applied to the analysis of the human mind. And inevitably, the problem of determinism or free will. These

philosophical dilemmas obscured, it would seem, the real issues which had to be tackled if scientific advance was to be possible.

But a second path may be traced bearing on the question of psychology - certainly more recent and often opposed, explicitly or implicitly, to the first. It can be followed through the progressive developments of medicine, biology and physiology, which stressed the material and organic basis of human characteristics and gradually discovered the structures and processes which comprised the complex enclosed volume of the human body, and described the means by which it came into contact with its milieu: the anatomy of the brain, the localisation of sensory functions, the discovery of lesions, the elaboration of the structures of the nervous system and its mechanisms of reaction and transmission, the tabulation of its ills and defects.

This, then, is the long past of psychology, a past structured by an opposition between two paths, in each of which the proper object of a psychological science suffered a certain reduction - on the one hand through a philosophical appropriation of the psyche into the closed circles of metaphysics, on the other hand through an organicist reduction of the psyche to the biological processes of the body. And between these two paths the absence of a science of the mental life of man can only appear to be enigmatic, that of which it was the object of so many to speak but which, in one way or another, always resisted being spoken.

And then, in the middle of the nineteenth century, things began to change. The change is marked in these histories, first of all, at the level of methodology. For the problem, it would appear, was above all this: the peculiar subject matter of psychology, the human mind, was proscribed as a possible object of experimental methodology by the dogmata of religion, of philosophy, and even of science

itself. Either mind had to be divorced from body - the latter, at least by the eighteenth century, a possible object for scientific study, the former too noble for such an enquiry, the privileged arena of religion and metaphysics. Or else mind had to be reduced to body, to no more than the mechanical interplay of sensations and associations (as, for example, in the heretical theses of the Ideologue Cabanis who pushed the sensationalist theses of Locke and Condillac to their extremes). In either case the investigation of the mind could not be scientific; it proceeded only by deriving the necessary principles of human mental activity from a series of speculative premises. Rather than going about their work through the laborious process of hypothesis, experimentation, reformulation, replication and so forth these writings were based, in the last instance, upon adherence to one or other general metaphysical doctrine.

Yet in the middle of the nineteenth century these blockages began to give way. Not all at once, it is true, but slowly and arduously the fundamentals of a science began to be established in the domain proper to psychology. No doubt Herbart was still within the old frameworks when he modelled his proposals for a scientific psychology upon mathematics, but nonetheless he did so in the attempt to provide specifically psychological laws of operation of the mind. Fechner's psychophysics was doubtless affected by his theological beliefs, but it certainly initiated the tradition of quantitative experimentation upon mental phenomena. Wundt was indeed handicapped by the attempt to contain his experimental approach within the old practice of introspection - with the privilege it accorded to the subject in gaining knowledge of mental processes - but through these pioneering experiments psychology gradually began to organise itself

as a distinct and legitimate scientific activity, and to define its external relations with the enquiries proper to biology, medicine and philosophy.

Thus in these accounts it would seem to be the change to an experimental methodology which marks the birth of psychology as a science after its lengthy gestation. And from this moment of parturition one sees the infant science undergoing a slow process of development and maturation: the successive advances in theory and methodology, the accumulative tradition of experimentation and observation, of the elaboration of testable hypotheses and synthesising laws, the cumulative record of crucial experiments, innovatory conceptions, proofs and disproofs. Not that psychology yet has the unity which can be found in thé 'model' sciences of physics and chemistry - this distinction between psychology and its methodological mentors is noted repeatedly. But if psychology is still a heterogeneous discipline, with diverse and competing theories often displacing one another without regard to the proper processes of comparative evaluation, or even subsisting side by side without entering into proper dispute, if there is so little agreement on the investigative procedures proper to the object of psychology and even polemic and controversy concerning the very terms with which this object should be defined, nonetheless this is a diversity in unity, characteristic of the youth of any science, healthy and proper to the emergence onto the field of knowledge of a new science of man.

Thus, for Murphy and Kovach, whilst "the very birth cry of the infant science is still resounding" throughout the "vast melange" of "experiments, measurements, hypotheses, dogmas, disconnnected facts and systematic theories" of psychology, yet "in another sense psychology is as old as civilisation, and this seething multitude of investigations and opinions springs from a rich and variegated

history ... Whatever difficulties there may be in finding unity in the various psychological disciplines, there is at least one unity to which we can cling for orientation and perspective, for appreciation and synthesis; and this is the tranquil unity of history."[3]

It is within this 'tranquil unity of history', then, that such accounts reconstruct the trajectory of psychology from prehistory to history, a trajectory which has the form, on the one hand, of a necessity, and, on the other hand, of a tradition. A necessity: above all else, the unity of the history and the prehistory of psychology, and the unity of all those distinct 'disciplines' which are considered to make up psychology at any given moment, is a unity of the object. If these different theories, these competing arguments, these differing methodologies, exist in a form which enables them to be unified from the perspective of history this is simply the result of the fact that they are deemed to have a common object - man. The unity of psychology, of the history-prehistory couple, is thus a unity of the referent. It is the fact for all these accounts that these discourses, whatever their diversity, seek to speak of the same given object, which exists independently of them and awaiting discovery by them. Characteristic of this given object is both its modernity and its antiquity: to incorporate a discourse into the prehistory of psychology it must be rewritten in the future anterior - these discourses speak of that which will become the object of a scientific psychology. The fundamental operation of such historical surveys is thus a triangulation - the construction of a conceptual space, thought of as 'history' which has as its apex contemporary scientific knowledge of a given object, from which a series of lines of descent are constructed so that they appear to converge upon it. Appear to: of course they do not so much converge

upon this apex as radiate from it. They are necessarily thought according to a teleological logic. If that of which modern psychology speaks is the truth of an object which is given in reality external to it, and is therefore itself trans-historical, one could only be seeing, in these discourses of the past, the halting attempts made in other times, in other places, to gain access to an object which is the very same.

So the condition for such an appeal to the unity of history in psychological historiography is, first of all, an epistemological stance which has no way of avoiding empiricism whatever its pretensions. The object of a scientific discourse must be conceived as existing in a given form which is adequate to a knowledge of it. Man must exist in all his fullness as the horizon to which all discourses of psychology point. The progress of psychology is thus a process of 'discovery' - a process whose goal is to achieve a relationship of adequacy between these discourses on man and the essential nature of man. It would not be appropriate to rehearse here the epistemological paradoxes to which such a position leads; our concern is with the effects of this position upon these historiographic discourses themselves.[4]

There is a second important consequence of the conception of history as unity entailed in these accounts. Historical time for the progress of psychology is constituted as a single vector which has the object at its horizon. Time is thus unilinear - the time of the history of psychology is that of a simple movement from past to present, within which all elements must march in step. The texts which make up the corpus from which such an history is constructed may thus be arranged in a single sequence from ancient to modern. Thus the unity of history becomes that of a tradition, and for any given aspect of the past or present of psychology a series of

precursors may be identified along this dimension. Historical advance consists in the transmission of truths which have been acquired, of problems solved or left unsolved, of flashes of insight or accumulated evidence from one scientist to another "along the thread of linear and homogeneous time whose only virtue is to pass (or to be past)".[5] It is no wonder that the favoured form of argument in these historical accounts is the identification of such precursors - of those who, before their time, thought something upon which a whole theory will be elaborated by those who follow. The precursor is one who, at some time now past, forged a short length of the path towards a given object which, more recently, has been extended, broadened, consolidated by another.

As George Canguilhem has pointed out, the writing of history as tradition is dependent upon a conception of the unity of the object of scientific discourse across its history, for it is only the trans-historical nature of the object which is capable of supporting the procedure whereby two texts from different historical periods may be mapped onto one another as precursor and successor:[6]

> A precursor is supposed to be a thinker of several periods, of his own and of those assigned to him as his continuators; as the executors of his uncompleted undertaking. Hence the precursor is a thinker whom the historian believes he can extract from his cultural frame in order to insert him into another, which amounts to considering concepts, discourses and speculative experimental acts as capable of displacement or replacement in an intellectual space in which reversibility of relations has been obtained by forgetting the historical aspect of the object dealt with.

For these historians, then, psychology forms itself in a unilinear tradition structured along a dimension of truth - as the historical sequence unfolds, error progressively diminishes and truth is correlatively increased. Time and truth appear to exist in a fundamental complicity, so that one may assert with some certainty that chronological priority equals logical inferiority. Time appears to function also in some more profound way, not merely as a marker or index of progress but as something like its motive force. If progress is linked in this necessary way with temporality, then this linkage must be unconditional, that is, without conditions external to temporality *per se*. It is the very passage of time, the fact of an event being past, allowing a future event to utilise it as a precursor, which produces the accretion of truth and the diminution of error. The conditions which affect the progress of knowledge are external to it, contingent with respect to the forward march of truth. Truth, in this sense, is immanent to the object of knowledge, or at the very least to the relation between the scientist, as subject of knowledge, and the real object which he seeks to know.

Within historiography of this type the elements which can enter into the history of a scientific discourse are both reduced and proliferated. On the one hand, elements beyond the essential scientist-object relationship are reduced to the status of externalities. Such elements may facilitate that relationship or they may obstruct it, but in any event they can only affect it from outside. Hence these accounts accord such a critical importance to the question of methodology, for historical movement is to be located here, within the activities of a subject striving to grasp the object which motivates its search. Yet, on the other hand, the elements which may act as stimuli or obstacles to progress become, in principle, without limits. The explanatory structure of a science at

any given historical moment exerts no intelligible constraints upon the nature of the transformations to which it may be subject. Nor does it limit the elements which can affect the activity of the scientist in such a way as to advance or impede progress. Since anything might be said about an object of scientific knowledge at any time, what causes something to be said or not said can itself be anything. No wonder these historical accounts think their meagre chronologies in terms of such a limited set of scenarios - adventures of the imagination, accidents of biography, flashes of insight, discoveries of forgotten writings, unexpected events, unanticipated consequences, miracles of invention. Where there is a relation of immanence between knowledge and its object, all which is external to that relation may exist only as a field of pure contingency with respect to it.

Yet if this is the form of so many of the accounts of the history of psychology with which one is confronted, one might be forgiven for wondering just what the motivation was for a labour of writing which repeats the same tale endlessly, which is so meticulous and yet so impoverished in the insights which it provides into the processes involved in the formation of this new domain of scientific explanation. Indeed it would be an error analogous to that for which we would criticise these histories themselves if we were to see, in this form of writing history, a simple mistake of methodology, continually repeated due to a lack of analytic awareness or philosophical correctness. These accounts are better understood somewhat differently. They do not occupy a field external to that of the psychological discourse with which they are contemporary. On the contrary, they gain their rationality from the way in which they function internal to psychology itself. We can single out two

aspects which are of some importance.

Firstly, historiographic discourse in psychology serves to demarcate the field of psychology's modernity and to produce a redistribution of elements within the corpus of past texts. This redistribution effects a distinction between the sanctioned and the lapsed, between those elements which are consonant with the contemporary regime of scientific truth (and may therefore be included within the canon of texts and arguments which have formed the precursors of modernity) and those elements which are discrepant with this regime (which must be expelled to a lapsed history of errors, illusions false paths and byeways, diversions from the forward march of knowledge).[7] In this sense the texts of psychological historiography are programmatic: the object of which they speak - scientific psychology - is both an existence to be ratified and a reality to be produced. Many discourses establish their claim to truth in part through such a construction of a sanctioned history. At one and the same time the discourse is legitimised through the construction of lines of ancestry and descent and its novelty is demonstrated with respect to this filiation. Within scientific discourses themselves this operation has a certain justification. It is, no doubt, vital to distinguish between those concepts, experiments, speculations, bodies of evidence which remain contemporary and those which are obsolete. The former must be taken into account in the formulation of new data, the construction of new arguments and proofs and so forth; the latter are impertinent to the current concerns of scientific activity. It is in this sense, as Georges Canguilhem has pointed out, that history is an internally functioning element in the organisation of scientific truth.[8] Scientific discourses are governed by definite norms of truth, and modes of formulation and recognition of true propositions, and this

entails a certain conception of the history of these norms and a constant and recurrent evaluation of the transformations which have produced it.

Yet if a standard of truth and falsity functions as a necessary internal element in the recurrent histories which sanction contemporary science, we must nonetheless recognise its consequences for scientific historiography itself. Histories of this type have a horizon which is necessarily that of the contemporary. They are thus unable to grasp the norms according to which the contemporary operates to construct truth, precisely because these norms constitute the very ground and the limit of the historical enterprise. If present norms of truth are deployed as the unquestioned means of evaluation of past norms of truth, such histories must remain unable to think the historicity of truth within the history of psychology. They are condemned to provide a philosphico-historical reprise on the operation of those discourses which are their object. Their histories are teleologies which serve to grant an imprimatur to the psychology of the present.

These histories have a second function. We have seen that to write the history of psychology as a history of truth is to be unable to pose the question of the historicity of psychological truth itself. It is also to elide the issue of the conditions under which psychology's norms of truth could become historically established. We have already seen that such histories construct the scientist-object relation in such a way that other social relations can only enter into psychological discourse as externalities, as obstacles or facilitations to the passage of knowledge to its truth, as mere contingencies. It is impossible for these histories to form the following question. Were there particular social, political,

institutional and technical conditions which, at a given historical moment, established the conditions of possibility for the formation and functioning of psychology's regime of truth? In these histories, this question is replaced by another, characteristically expressed through the use of the terms influence and application. Influence: the fact that anything from an author's childhood, a chance meeting, a contiguity of time and place, a text published elsewhere, may in its passage through the synthesising psyche of the scientist so stimulate and direct the mind as to accelerate the process of scientific discovery. Application: the fact that a discovery, once made, may have important social uses in a variety of domains. What concerns us at this point are not the epistemological underpinnings of such historical accounts - the privileging of authorship, notions of creativity, discourses as tools for utilisation ... - but the consequences for the form of history which is produced. For the effect is to propose a pure domain of interiority to scientific knowledge and to scientific progress. In such histories, then, the social and historical conditions which made a science possible must necessarily be non-pertinent to the explanatory structure of that science.

For this 'authoritative' historiography of psychology, it is contemporary psychology itself which forms the horizon and the limit of historical analysis, the perspective from which the past is unified as a tradition of precursors and from which judgments may be dispensed upon the past as to the validity of its truths. This is an operation which certainly has a function internal to psychology. However even if one places epistemological questions to one side, such an approach is somewhat limited if one is concerned with understanding how a scientific discourse on the mental life of human individuals became possible, the structure and transformation of the

explanations and conceptualisations in which it consisted, and the social consequences of such an historic event.

Sociological approaches to the history of the sciences

The sociology of science has produced many studies of the historical emergence of scientific discourses, and of their social existence and consequences. It is beyond the scope of the present chapter to provide a comprehensive review or analysis of this field.[9] Instead I will investigate in detail one currently popular approach. This is the so-called 'strong programme' which argues that the nature and content of scientific knowledge is amenable to sociological explanation. In the most recent writings in this approach the notion of 'interest' has been deployed as the principal means of explanation of the link between a scientific discourse and its social conditions, and therefore this notion will be a major focus of the present discussion. Wherever possible I will illustrate my account with reference to work which has dealt with aspects of psychology and its history. However in order to examine some of the theoretical problems which arise in such an approach, it will on occasion be necessary to examine studies of rather different substantive areas.

Until about two decades ago, sociological studies of science operated, by and large, according to a division between 'internal' and 'external'. There was a realm internal to any given science: the organisation of its theories and concepts, the changes, developments and transformations of its theoretical structure. The analysis of this internal aspect of the sciences was a matter for scientists and philosophers of science. Scientists themselves were the appropriate people to understand the errors, sidetracks, insights and discoveries which had led up to the present state of knowledge in any particular science. Philosophers of science were the appropriate people to evaluate this history, and their evaluation had a double exigency. Firstly it entailed an attempt to provide criteria for what was to

count as a science and its appropriate logical, epistemological or methodological characteristics. This was a demarcatory process, whose fundamental operation was the separation of the true from the false, of science from pseudo-science. But secondly, the history of science constructed by philosophers of science attempted to give a post hoc justification for the scientificity of those activities already known and accepted as scientific. This is a procedure which is thus premised on an acceptance of the history of the sciences as a progressive growth of knowledge. The whole notion of a 'rational reconstruction' of the history of the sciences, of a 'logic of scientific discovery' arises from the paradoxical project of trying to reconcile the latter exigency with the former.[10]

But separate from these internal questions was the analysis of a realm external to science, which concerned not the details of its theoretical organisation but its institutional and social existence and role. This included such questions as the career patterns of scientists, the nature, organisation and even funding of scientific institutions, the rate of growth of sciences, the spread of knowledge amongst a scientific community, the disputes which characterised scientists as social individuals: science as a social activity taking place in a political context. These areas were considered amenable to sociological investigation, and this investigation could be conducted without, in the main, touching upon the structure or content of scientific discourse itself, far less the knowledge claims which it made.[11]

In such analyses, however, there was one issue in relation to which the two realms came into contact, and where sociology could extend its remit into the internal domain of science. This was where contemporary science itself had characterised certain previously

accepted theories or explanations as false or irrational, as imposters masquerading as science. The rational character of science itself and its progress towards truth needed no social explanation - it was the noble consequence of enquiring and conscientious minds working upon nature in order to understand it. Where deviations occurred, then and only then did a social explanation have to be invoked in terms of the intrusion of elements which had no place within proper science - irrationality, religious prejudice, dogmatic beliefs and so forth. Like the authoritative histories discussed in the previous section, such accounts adopt an empiricist conception of scentific knowledge. Where the object itself is conceived of as dictating a knowledge of it through the medium of experience, false knowledge must be a consequence of biases entering into and distorting that experience, often by means of the use of incorrect methodological protocols.[12] Hence, for example, the Popperian project to ensure the scientificity of science by controlling the activities of the scientist, thus ensuring the correct acquisition and utilisation of experience.[13]

The strong programme in the sociology of science explicitly opposes such approaches.[14] The term which it uses to describe its orientation is 'naturalistic'. This term is ill defined, but its main purport is to suggest that science should be studied like any other social phenomenon. For the sociologist, knowledge should simply be what is <u>taken</u> to be knowledge by people in a particular culture at a particular time. Scientific knowledge is part of culture like any other, and can be studied in the same way as other aspects of cultural beliefs. What is scientific is simply what actors believe to be scientific. The strong programme is thus not concerned to <u>evaluate</u> knowledges in terms of their truth or falsity, rationality or irrationality, or the extent to which they form a part

of the progress of science. It is concerned with the analysis of the social and other conditions, or 'causes', which give rise to particular scientific beliefs. It bases itself upon the assumption that the same types of explanations are, in principle, applicable to 'true' and 'false' beliefs. It stresses, to head off certain simple-minded objections, that of course the sort of explanations it proposes are applicable to sociological knowledge itself, and hence to sociological accounts of science. However this reflexivity is not regarded as a problem, for to demonstrate that certain beliefs or theories have social determinants does not invalidate them - all knowledge has social determinants, even true knowledge.

We can see that the strong programme sets up its problem in terms of a separation and a relation. First of all there is a separation into two general realms - that of knowledge (part of a realm of ideas or beliefs) and that of society or social conditions. It then poses itself the question of the relations between the two, in terms of the direct incidence of the 'social' upon knowledge itself, rather than simply upon its social deployment. In order to examine the approach being proposed more closely, and to evaluate its claims, it is necessary to look first of all at how the two realms are characterised and demarcated, and then to consider the relation which is proposed between the two, and how the central claim of the strong programme is justified.

What, first of all, of knowledge? Knowledge, for the strong programme, consists in ideas or sets of beliefs. It thus forms part of a general domain of culture, which includes religious, political and aesthetic beliefs, for example, as much as those designated scientific. And these latter include logic and mathematics as well as the natural sciences. These beliefs form a general class: no

means are provided for distinguishing, say, between the belief in a particular mathematical theorem and the belief in a particular political doctrine. However, as we shall see presently, the argument does distinguish between some types of belief, if only to establish a relationship of priority and reflection between them. More generally, however, beliefs are distinguished from something else which might have a claim to form part of the same class - opinion. Knowledge is amongst those "beliefs which are taken for granted, institutionalised, or invested with authority by groups of men" that is to say "collectively endorsed", as opposed to those ideas which are individual, idiosyncratic, "mere opinion".[15] As we shall see presently, there is more than a touch of circularity in the argument which will subtend from this initial definition: the argument as to the social status of knowledge is dependent upon a definition of knowledge in terms of the very social factors whose pertinence the argument is supposed to demonstrate.

Scientific knowledge, for the strong programme, does have a relation to truth. However this does not differentiate it from other types of belief. Scientific knowledge is simply that which is conventionally accepted to be true in a particular society at a particular historical moment. When a society designates certain beliefs as true, it gives those beliefs an authoritative status which may then be utilised in the social processes which seek to transmit and enforce settled opinions and conventions. This, it is stressed, is not to belittle scientific knowledge. Bloor, for example, goes out of his way to say that it is not a case of <u>mere</u> conventions since these are not arbitrary. They have to be able to obtain a social credibility and a practical utility, to be acceptable and consonant with other settled beliefs. Conventions are not facile or trivial, they are often harsh and demanding. To say that truth is a

convention, then, is not to demean it but to enable the analysis of its social constitution and functions.

Traditionally, histories of sciences have accorded a crucial role in scientific progress to the experiment, for this is the moment of confrontation between a theory and its object, where nature has its chance to say 'yes' or 'no' to thought. For the strong programme, experiments can have no such status.[16] Bloor, for example, demonstrates that Priestly's experiments, which are traditionally conceived of as refuting the phlogiston theory of combustion, were in no sense such a confrontation. The construction of the experiment, the interpretation of the results, the 'recognition' of anomaly and the rectification of the theory all happen internal to the space of theory itself. Thus there was nothing within the phlogiston theory which led to its replacement with the oxygen theory of combustion, for it had an available explanation for the 'anomalous' experimental results which did not question the basis upon which the theory was founded.[17] The conclusion which is drawn from this argument is that it must be to extra-theoretical developments that we must look if we are to be able to explain the theoretical shift which did occur. These are transformations in the social conventions which accorded the status of truth to certain beliefs and witheld this authoritative status from others.

What content does the strong programme give to its claim that knowledge consists in ideas which are taken to be true because they are social conventions with authoritative status? Over and above the general assertion that knowledge is social, neither a property of the object nor of the individual, it is argued that these conventions may be related in a non-general, and non-trivial, way to the nature

of the society of which this knowledge is a part. This question is posed in various ways by different authors within this approach.

Bloor adopts a position which is familiar within the sociology of knowledge. He seeks to demonstrate a convergence between the conventionally accepted features of a science and other beliefs which are prevalent in the society in question at the appropriate historical moment. This congruence proposes a unity within the realm of beliefs - culture - which may be analysed in terms of 'underlying social metaphors'. In fact this unity is thought of in terms of a small number of general oppositions. For example, there is the general opposition between 'enlightenment' and 'romanticism'. This can be shown to underlie a variety of cultural beliefs. It also can be shown to characterise various oppositions within knowledge. Bloor chooses as an example the opposition in the philosophy of science between Thomas Kuhn and Karl Popper. Popper's thought is congruent in tone, style, metaphor and content with 'enlightenment social thought': both appeal to an apparatus of natural rights of the individual, social contracts between rational individuals who use an unchanging moral calculus, and an ethos of social reform. On the other hand, Kuhn's account of science represents 'romantic' thinking: focussing on the property of social wholes, their historically changing nature, the inextricability of facts and values in the real social existence of individuals.

These general cultural oppositions are linked in turn to congruent social and political oppositions, and argued to be also represented in economic theory, political theory, moral theory and so forth. Thus Bloor claims to have demonstrated that scientific theories stand squarely on conceptions of society. He can thus advance the hypothesis that "theories of knowledge are, in effect, reflections of social ideologies" - where a social ideology is a

taken-for-granted pattern of ideas which individuals have acquired as a result of their socialisation and which gets 'unconsciously embedded' into theoretical discourse.[18]

If Bloor's analysis is radical, it is only in the application to science of a position which is well worn elsewhere. He himself recognises in places that were he speaking of aesthetics or ethics his view would be utterly conventional. The characterisation of epochs in terms of broad unities of 'images' or 'world-views', the opposition between enlightenment and romanticism, the treatment of discourses as wholes which express a certain style, tone, metaphor and so forth - all these are familiar devices in the sociology of knowledge. Hence the account shares some familiar shortcomings, which it is useful to briefly enumerate.

Such an account runs together discourses of various types - scientific, religious, political, philosophical, aesthetic - into global unities which are then said to manifest something like a Weltanschaung. Texts and ideas inhabit an homogeneous space of 'culture' behind which lies a 'spirit of the age', which expresses itself within them. Texts are then read as signs of these underlying world views, and the interpretation of the former in terms of the latter is what counts as an explanation of the social existence of a particular text.

The corollary of such an analysis is an inattention to the details of texts and discourses. The statements which make them up, with their specific objects, systems of explanation and modes of conceptualisation are read through a preconstructed grid. This grid enables the selection of elements of the discourse on the grounds of their consonance with the images or metaphors which are supposed to inhabit them, merely on the grounds of their apparent congruence with

other social and cultural forms. There is no attempt to assign particular weight to differing concepts or arguments in the discourse under scrutiny. When a congruence can be shown it is triumphantly held up as a demonstration of the operation of the social in the textual. Those aspects which do not so conform are passed over in discreet silence: their social status remains unexamined.

Social positions, social images, cultural metaphors and knowledges are treated as if they existed in a relation of reflection to one another. This ignores the specific properties and modes of formation and operation of each. It also performs contradictory operations at the various levels. On the one hand positions taken up in the field of scientific knowledge are argued to reflect conceptions of the nature of society, thus assigning a position of priority and determination of the latter over the former. On the other hand, both are considered to be expressions of a process more fundamental still - the 'unconscious ideas' which are instilled by socialisation, by the ways in which individuals are trained up in particular ways of seeing, thinking and so forth. Hence one has a paradoxical combination of sociological and psychological reductions of scientific knowledge. In either case, whichever form of reduction is accorded temporary priority, scientific knowledges are explicable only to the extent that they may be regarded as the expression of something outside them which determines and animates them.

Two further points may be made before turning to a different approach. Firstly it should be noted that the move towards psychological reduction is <u>necessary</u>, given that no other analytical means are developed for specifying the mechanism for the realisation of social factors within scientific knowledge. In the absence of these, the most obvious option is to imply that this occurs during the passage of experience through the mind of individual scientists

equipped with particular psychological characteristics as a result of their socialisation. Secondly, this approach fails to account for the specificity of scientific discourse, for precisely that which gives scientificity to particular discourses. Is there nothing peculiar to those knowledges which are taken at a certain historical moment to be explanations of a domain of phenomena, and explanations which are truthful? It is not accidental that scientific truths cannot be discriminated from religious, aesthetic, political or moral truths within this approach, for the analysis is, as we have seen, premised upon the identity of science with other aspects of a single field of culture.

Recent writings from within the strong programme have turned away from the globalising form of explanation proposed by Bloor, although propositions of this type are sometimes utilised to fill in corners of their arguments. The explanatory strategy which has been adopted appears more highly specified. Within the general objectives of the strong programme, a specific mechanism is proposed for the relationship between the social and the scientific. This is the familiar sociological mechanism of 'interests'. It is claimed that the emergence and transformation of scientific theories, and the positions which are taken up within scientific disputes, may be explained in terms of the social or cognitive interests of the scientists concerned.[19]

Let us consider an example taken from an area pertinent to the present study. Donald MacKenzie has analysed the development of statistical theories in England in the late nineteenth and early twentieth centuries. He relates this to the social, political and professional interests of the parties concerned, as expressed also in their attitudes to eugenics. Eugenics, it is argued, was a reading

onto nature of the practice and experience of an intellectual aristocracy, with its commitment to change and increasing efficiency within capitalism. The concern of 'positive eugenics' with encouraging the fertility of the middle classes expressed the interest of middle class professional males, confronted with feminism, in returning women to home and motherhood. Similarly it is argued that there is a 'fit' between Galton's statistical theory, with its concern for measures of statistical dependency, and the naturalism of eugenics and the interests of a rising scientific sector of the professional middle class. And in the case of the dispute between the Biometricians and the Mendelians, MacKenzie argues that "the detailed technical judgments made by the two sides reflect at least in part the social interests of groups of scientific practitioners with differing skills".[20]

In other examples of such an approach, Shapin argues that the views advanced by phrenologists in the nineteenth century concerning the relations between shape of skull and traits of personality and intellect were a function of their social interests; Harwood argues that the positions adopted by hereditarians and environmentalists in debates concerning the relation of race to intelligence were shaped by the differing professional interests of the opposing parties, and so forth.[21] In one of the key theoretical statements for this approach, Barnes writes:[22]

> There is little or no knowledge which does not to some extent reflect in its content the operation of unacknowledged interests; there is no knowledge where such interests do not influence its organisation and distribution. Knowledge grows under the impulse of two great interests, an overt interest in prediction, manipulation and control, and a covert interest in rationalisation and persuasion.

Knowledges, it is argued, are resources which participants in social and political life draw upon and utilise, consciously or unconsciously in order to advance their own interests and defeat those who are opposed to them. They do this sometimes cynically but often with genuine belief. Knowledge is not to be understood in terms suggesting passive and dispassionate contemplation; its development and deployment is an active social process. This process is frequently characterised in terms of a distinction between the goals and objectives around which social actors explicitly organise and to whose furtherance they direct their efforts, and interests, which are more fundamental and often unrecognised by those who pursue them. Thus MacKenzie concludes his study:[23]

> Science is an activity not of passive contemplation and 'discovery' but of invention. It is goal oriented, and, while its goals may all in a general sense have to do with the enhancement of the human potential to predict and control the world, they represent different particularisations of this overall obective. The pursuit of particular goals is typically sustained by social interests located either in the internal social structure of science or in that of society at large. Scientific knowledge is thus a social construct in two senses. First, in that it is typically the product of interacting groups of scientists. Second, in that social interests affect it not merely at the organisational level but at the most basic level of the development and the evaluation of theories and techniques. Because science is goal oriented, and because its goals are socially sustained, scientific knowledge is constitutionally social.

It can be seen that this version of the strong programme is similar

to that already discussed, with the mechanisms of socialisation, unconscious ideas and images replaced by those of goals and interests. I will therefore focus my criticisms upon the question of interests.

There are two general ways in which the link between social interests and science is conceived. Firstly there is the case where the interest is explicit, in that the individual concerned is overtly attached to a particular position and actively mobilises scientific findings and activities in support of that position and the objectives and goals which it seeks. Here the strong programme suggests that there are no analytical problems in the identification of interests. However in a second case certain 'technical difficulties' in this identification are acknowledged. In this case the interests at work are covert or concealed, they are denied or at least never mentioned by the scientist in question, and often unknown to them. The identification of such concealed interests is considered a complex and difficult task; it is not, however, impossible in principle and is the appropriate objective for sociological analysis.

Consider first the case where the interest is apparently evident, and where an overt and explicit link between the interest and the theory is said to be observable. An example here would be the link between the attachment of Galton and Pearson to eugenics and the statistical theories and measures of association which they developed. The relationship between the theory and the interest might be thought to be clear. Knowledge, it was argued, is a resource drawn upon by social actors and deployed in pursuit of their interests. The rationalisation and justification of eugenics required that associations be demonstrated to exist between certain

variables. The measures of dependency developed by Galton and Pearson provided an apparently scientific, neutral and objective measure of such associations. They thus legitimated eugenic beliefs and enabled Galton and Pearson to deploy such theories in support of their social goals. This is not to imply that the development of these measures was done cynically, but merely that actors with particular interests, organised around particular goals, are predisposed to make and believe certain knowledge claims rather than others. However, a number of problems arise in such an analysis.

Knowledge, it is argued, is a resource. However these arguments tell us nothing about the conditions under which certain knowledges become available as possible resources. Clearly there is only a limited number of scientific theories which are possible at any given time, and hence available for selection in the service of particular interests. Yet these analyses are silent about the circumstances under which a particular range of options are present, and others are absent. How, for example, did it become possible to think statistically about human attributes at all, and what were the theoretical conditions which allowed certain arguments to count as statistical at particular times? Interest analyses take these fundamental questions concerning the constitution of scientific discourses with particular explanatory structures as given. For the purposes of the analysis, the conditions of possibility of scientific knowledges are reduced to their suitability for deployment in support of interests.

The interests of agents who mobilise around particular goals are considered to be related in a self- evident manner firstly to those goals themselves, and secondly to the precise theoretical form which will help to achieve or further them. But how are particular goals derived from general interests, and how are these realised in

specific theoretical choices? Interest analyses take this derivation and realisation as self-evident: given these interests, any rational agent would formulate these goals and realise them through a choice of this particular theoretical position. It appears that this occurs independently of the particularities of the conditions, discourses and contestations in which the agents are engaged. However such an assumption is unwarranted. Neither goals nor theoretical choices can be simple realisations of 'interests', since any 'interest' will allow the formulation of a number of specific goals, and any goal would allow the choice of a number of distinct theoretical positions to realise it.

Eugenicists explicitly saw their interests in terms of increasing social and national efficiency, raising the quality of the population, reducing the social threats caused by the rapid breeding of unemployables and defectives. But these interests could certainly have been satisfied by other than eugenic means, as we shall see in a later chapter, and even within the general strategy of eugenics the interests in themselves are an insufficient explanation of the particular policies, emphases, and proposals which were put forward by the varying groups. And similarly, these interests were quite compatible with a number of different theoretical choices within evolutionary biology and statistical theory. The way in which objectives were specified and the particular working through of theoretical choices was the product of complex systems of explanation and calculation available to the agents engaged in these practices. It is these, rather than the supposed 'interests', which require analysis if the formation of eugenic theories and arguments is to be made intelligible. Nor can this difficulty be overcome in the way which is commonly utilised in these accounts - the ad hoc generation

of further interests to account for different aspects of these processes illustrates the weaknesses of the type of explanation rather than rectifying it. Neither objectives nor theoretical positions can be adequately analysed in terms of such an interest realisation model.

Let us turn to consider the case where interests are said to be concealed, in the sense that scientists are not explicitly attached to them, and do not actively organise around them. It will be evident that even in the case discussed above it was assumed that there were interests involved which were unrecognised by the participants. Whilst Galton and Pearson explicitly acknowledged their concern with certain social problems, their commitment to certain types of social policies and so forth, their adoption of these goals was explained in terms of interests not consciously avowed - those of the rising male professional middle classes in countering the threat of feminism and achieving social power through technical control. These interests are attributed to agents on account of the category into which they fall - male - or their social location - professional, middle class. They are conceived of as objectively given, as ontological. The problem with such an analysis is one of sociological reductionism. Where desires, forms of calculation and so forth are attributed to agents simply by virtue of their social location, the mechanisms by which the desires and calculations are produced remain unspecified, and disputes between similarly located agents become unintelligible. Once it is accepted that definite processes are involved in the construction of desires, and in the production and selection of particular means of calculation, the expressive relationship between activities, calculations, desires and social location is threatened. For if these mechanisms produce real effects, and if they have a genuine

existence of their own, then the 'realisation' of interests must always be dependent on conditions exterior to those interests themselves. If this is accepted, then the very reference to 'concealed interests' is unhelpful. Since there is no 'natural' relation, or simple congruence, between a social location and particular desires, it becomes necessary to specify in particular cases the way in which social agents have come to be constituted with specific desires, and the ways in which these have been formulated into interests and objectives through certain discursive means.

Interest arguments assume the existence of given social locations occupied by human subjects who calculate according to a natural rationality. Subjects situated in these locations could do no other than wish, believe, think and act as they do. This form of reductionism is common to much sociology, and to the sort of marxism which forms the theoretical back-drop to many of the interest explanations in the strong programme. It has been extensively criticised elsewhere.[24] Explanation by reduction to interests is a mode of analysis which may be termed 'critique'. 'Critique' will be discussed in more detail in the next section of this chapter. It is a form of argument which seeks to explain events at one level through an interpretation of them as expressions of events or processes at another level. This second level is conceived of as deeper and more fundamental, and as the motive or truth of surface events. Interest accounts vacillate over the causal status to be accorded to the hidden interests which are 'discovered' in relation to the surface events which are being analysed: sometimes interests 'explain', sometimes they 'influence', sometimes they 'fit' or 'match', sometimes they merely 'help one understand'. However the reference to interests in these accounts functions as a claim to demonstrate

what events and disputes were 'really about' and hence also as an exposée of pretensions to scientific neutrality. Once the ontology of interests is rejected, the bankruptcy of this exercise is exposed and the explanatory priority of interests upon which it depends can no longer be sustained.

Of course, parties in scientific and social disputes do sometimes mobilise around what they conceive to be their interests, and relate their objectives and goals to such interests. However these interests cannot be regarded as prior to the disputes in question, as the given starting point for analysis or as the ultimate explanation for action. They are themselves constituted through particular discourses, and in relation to the specific practices in which agents and forces are caught up.

The issue for analysis is thus, in part, the construction of interests and the mobilisation of forces around them. However the relationship between these constructed interests and particular objectives is not one of realisation. It is necessary for analyses of the social existence and functioning of scientific discourses to take these problems as a focus for analysis and not regard interests as an unproblematic explanatory resource.

The medicalisation of social control

A further sociological approach is gaining currency in analyses of the human sciences. This is one which analyses their mode of operation in terms of 'social control' and which sees their historical development over the last century in terms of the 'medicalisation' of social control. I will consider first the question of social control, and then turn to the issue of medicalisation.

Analyses in terms of social control are currently fashionable in sociologies of welfare, social policy and medicine, and in studies of psychiatry[25]. The histories of policies, programmes and practices are explained as ways in which threats to the smooth functioning of the social order are averted or dealt with. Such arguments entail the belief that events may be adequately explained by demonstrating the functions which they serve. In this case the function at issue is one of suppressing deviant behaviour. Deviant behaviour is that which poses actual or potential threats to existing social and political conditions. To designate a social process with regard to deviant behaviour as one of social control is simultaneously to characterise that process, to account for its social existence, and to criticise it.

These arguments are predicated upon a particular view of deviance. Deviance is here conceived as having a certain direction, meaning and social genesis. It is both a result of and a protest against prevailing conditions of life, or the beliefs and expectations of an imperfect social order. However its political <u>potential</u> may be assessed, the fact of deviance is regarded as representing a implicit criticism of existing social relations.

Whilst the content of deviant activities and their social distribution might change, the meaning of deviance remains the same, and its regulation by various social agents has a double function. It both suppresses a source of social danger and simultaneously reinforces and legitimates those norms, beliefs and values which deviance threatens. Social control of deviant behaviours is thus essentially a 'police matter', which is brought into play when other mechanisms for ensuring social stability and contentment - for example, ideology - break down.

There are two central problems with such arguments. First, there is an illegitimate homogenisation of all 'social problems' under the rubric of deviance. Witchcraft in the sixteenth and seventeenth centuries, insanity in the nineteenth century and hyperactivity amongst schoolchildren today are all fundamentally the product of the same social mechanisms and have the same social significance. They share an essential property with criminality, homosexuality and drug taking. They violate social norms. This common non-normativity is the justification for seeking to embrace them all within a general sociological theory of deviant behavior.[26]

Such a sociological reduction of 'deviance' is unhelpful for a number of reasons. The argument is indifferent to the form of expression of deviance, for its meaning and significance is not at this level. Social control processes work upon any violation of norms in the same way - the fact of the violation is of more significance than the particular norm which is violated. This is to leave unanalysed that which in any of these behaviours is more than the mere violation of a norm: for example the specific social processes which, from the late nineteenth century on, have constructed the homosexual as both a functioning social category and a particular type of personality.

The homogenisation of deviance further obscures the specificity of the terms and conditions under which 'social problems' are constructed, and assumes a continuity and interchangeability between them. Thus Szasz, for example, can argue that there is a continuity between mediaeval witch-hunting and contemporary psychiatry: the two have the same origins in the persecution of the deviant, the same social functions of the suppression of a threat to social beliefs and a reaffirmation of the values of normality, and the same inhuman consequences. Paradoxically Szasz is in accord with the anachronistic historiography of the 'authoritative' historians of psychiatry; both suggest that mediaeval witches and modern mental patients are in some sense equivalent - though they disagree on what sense is in question.[27] But mediaeval Europe would disagree, not because it did not recognise the category of madness, but because the condition of being a witch was precisely that one was <u>not</u> mad. The point at issue is that the category of deviance obscures the crucial social consequences of the divisions and relations amongst the forms of behaviour that particular societies regard as problematic or troublesome. Thus, for example, in eighteenth century Europe, "blasphemy, religious profanation and witchcraft fell into the same category because they disturbed the public order" whilst the attribution of such behaviours to madness relieved the individual concerned of the severe penalties which would otherwise follow, because the behaviours were no longer regarded as the product of evil intent.[28] It is necessary to establish the nature and significance of the designations of, and divisions within, pathological behaviours; a general theory of deviance obscures them by suggesting that processes which are in principle identical are brought to bear on all categories of individuals singled out on account of breach of

norms.

Theories of deviance and social control routinely purport to have a critical function. However it should be pointed out that to designate a certain social mechanism as one of social control can only function as a criticism in itself if it is presumed that any such control is necessarily unjust or improper. The problem is that this is precisely what a criticism must seek to demonstrate; contemporary sociologies of social control tend to assume it at the outset. Are <u>all</u> processes of construction and regulation of social norms unjust, immoral, violations of some inherent right of individuals to define their own social reality? If this is not so, then a demonstration of the <u>fact</u> of social control is either otiose or irrelevant. Either it merely demonstrates what the analysis takes as a premise: that the social order is unjust, exploitative, and that any practice which tends to sustain it is automatically condemnable. Or what need to be demonstrated are the specific points upon which particular social mechanisms and processes are to be criticised. The tedious repetitions of the 'unmasking' of the 'social control functions' of the human sciences, psychiatry, social policy and the welfare state seldom approach the level of analysis of the existence and operation of the implicated knowledges and apparatuses which would be required to address these questions.

Despite the apparent radicalism of the sociology of social control, its proponents fail to consider seriously some central 'sociological' questions, and hence produce a versatile and empty form of analysis in which everything and nothing can count as an instance of social control. A reflection on some elementary points about social relations, which one might be forgiven for thinking had long been established, illustrates the unhelpfulness of setting up analyses in terms of deviance and social control.

All forms of human social organisation require and construct certain norms of behaviour and conduct.[29] Human attributes, from basic bodily movements such as posture or walking to the experience and expression of psychical states such as emotions, are underdetermined biologically. They have no natural or given form and cannot be merely expressions of biological or psychological givens. Hence social relations require a limitation and construction to be placed upon them. Personal and social behavior is constructed and regulated by practices such as those of family, education, language and law, and by belief systems ranging from 'popular culture' to explicit and organised political or religious ideologies. This is not, it should be noted, a simple matter of 'socialisation': social practices work upon biological and psychical processes which have their own mechanisms and can never merely reflect or internalise social conditions which act upon them.

The very complexity of norms of personal and social existence, and of the biological and psychical conditions upon which they work, entails the variability of human behaviours and the occurrence of behaviours which are discrepant from norms and which constitute a repertoire of pathologies. At the very least, this will be the case because cultures are not totalities, and norms are heterogeneous - any given individual will be the terminal for distinct practices with varying and sometimes incompatible norms. All societies thus contain agencies whose object is the social construction of the 'normal' and the constraint and regulation of the 'pathological'. Societies consist in definite practices, agencies and ideologies which constrain and regulate, produce and administer normality and pathology in personal attributes and behaviours. Neither normality nor pathology have any ontological status, but a society without

categories of pathology is as unthinkable as a society without norms. This is as true of socialist and communist societies as it is of mediaeval Europe, societies without organised state forms, and 'laissez faire' market societies. The nature, content and means of construction of social norms will vary. But the mere discovery of the existence of norms and of social processes for their regulation cannot pass for analytic acuity, still less for effective social criticism. To this extent the proclamation of the discovery of a practice of 'social control' as if this were both an adequate account of the practice, a condemnation of it, and an exposure of its corrupt truth is surely a little naive.

Contemporary sociological arguments over the social role of the human sciences frequently suggest more than their implication in practices of social control. They represent, it is said, a 'medicalisation' of social control. The argument, in brief, is that the contemporary role and importance of the human sciences can be understood in terms of a general trend in social control practices in modern societies, Such societies rationalise and legitimise their practices of control of deviant and troublesome groups and individuals by allocating this task to 'experts'. The human sciences provide the pseudo-scientific back-up to such experts, the intellectual counterparts of the practical technology which controls threatening social elements under the guise of helping them, and which purveys normalisation under the guise of therapy.[30]

This new arrangement in the organisation of social control is said to have a number of advantages. It first of all legitimates such control by redefining behaviour which departs from social norms as sickness, control as therapy, and the activities of the social controllers as enlightened, objective, scientific and motivated by humanitarian concern for the good of the sick individual, rather than

social concern for the maintenance of a docile population. Secondly, it allows the State and its agents themselves to feel that their practices of control are actually motivated by humanitarianism rather than narrow calculation of political advantage. Thirdly, it defuses the radicality of deviants themselves, since it leads individuals to accept the social definitions of their norm-breaking behaviour as sick, accepting the 'sick role', invalidating their active or passive rejection of the status quo, and rendering them dependent upon professional expertise rather than having their fate in their own hands. Finally, it provides lucrative employment, social status and great power for the rising professional middle class in general and, in particular, for the agents on the borders of psychology and medicine who specialize in providing scientific legitimation for the labelling and control of deviant behaviour.

In addition to the aspects of such arguments which have been criticised above, there are two elements in these approaches which deserve consideration. Firstly it is suggested that the knowledges promulgated by these experts in control of behavioural deviation are merely pseudo-scientific legitimations of their control practices. Particularly prevalent is the view, that the medical profession can be analysed as 'moral entrepreneurs' and that their knowledge claims concerning certain issues are spurious rationalisations of a wish to obtain monopoly rights over a domain of social power.[31] They are, that is to say, not scientific but ideological. The utility of the opposition between science and ideology will be discussed in detail in the next chapter. Here I will confine myself to pointing out that this type of argument mimics the worst history of ideas in adjudicating upon the inadequacy of past beliefs on the basis of its own unquestioned wisdom. The idea that the authors of texts in the

eighteenth or nineteenth century, any more than today, cynically invented a set of categories and a body of theory in order to justify or advance their own position is simply absurd. Certainly every science has its share of charlatans, and of those who mistake wishful thinking for theoretical argument. But the exposure of the few provides no means of evaluating the reasons why the vast majority of serious and dedicated scholars and practitioners accepted, at a particular historical moment, certain theories of pathology, practiced in the light of them, and argued for the correctness of their position and for it to be taken seriously by politicians and administrators.

Secondly, the notion of medicalisation implies a continuity between the medicine of the nineteenth century and that of today, in that our contemporary arrangements are supposed to bear witness to the success of the 'moral entrepreneurship' of the medical profession. But there is no such continuity. As has been argued elsewhere, in relation to Scull's account, "the history of modern psychiatric practice is irreducible to medicalisation".[32] The emergence of moral treatment of madness in the nineteenth century was neither a turning away from medicine, nor a victory for it. It was promulgated by clergy as well as doctors, and involved a transformation of the place of operation of medicine in relation to madness and a reformulation of the rationale for medical treatment of madness. It entailed as much conflict <u>within</u> the 'medical profession' as between medicine and other practices. There is no theoretical or organisational continuity in medicine across the eighteenth and nineteenth centuries which allows one usefully to postulate a general process of medicalisation. A range of dispersed changes established new relations between medically qualified agents, the organisation of local and national governments, the family, legal

practices, philanthropy and later social work. Terms like medicalisation, monopolisation and professionalisation at best describe certain elements of the historical shifts involved, but these limited terms of description can hardly pose as explanatory of the complex changes in dispersed practices which occurred.

The medicalisation argument, like that of social control, is intended to be a critique. Medicine is interfering in areas in which it has no right, for what is involved is not a medical matter but a social and political one concerning norms and expectations as to proper behaviour. However such arguments have a remarkably primitive notion of the theory and practice of modern clinical medicine. The authors imply that medical interventions are legitimate when, and only when, an individual can be demonstrated to be suffering from an identifiable organic malfunction. But such a criterion would deem illigitimate virtually all contemporary medical practice. It may conform to a view of clinical medicine held by its less enlightened theoreticians, but it is far from characterising its reality. Diagnosis of physical illness is a complex act of cultural judgment, involving assessment of both 'physical' and 'behavioural' symptoms. Definitions of health and illness in the case of 'physical illness' are just as much 'social' as they are in relation to conditions identifiable only through particular forms of behaviour or belief, such as 'mental illness'.

All medicine, physical no less than any other, involves the application of culturally determined norms concerning 'healthy' and 'sick' functioning of organs, bodies and persons. The counterposition of the proper use of medicine in relation to organic malfunction to its improper use in cases of behavioural deviation is over simple. Both involve an act of diagnosis in terms of deviation

from social norms. It is more appropriate to pose criticism of the use of clinical techniques in respect of abnormal forms of conduct or behaviour somewhat differently. For example, criticism of the norms themselves, the conditions of their application to cases, the practices in which they are deployed, the relations of power and distribution of rights and competences within them.[33]

It is not therefore appropriate to conduct the present analysis in terms of an history of social control and its medicalisation. In the following chapter we will outline the 'archaeological' technique utilised by Michel Foucault, which will provide the principal conceptual tools for the present study.

NOTES TO CHAPTER ONE

1 Quoted in Boring, 1929, pvii.

2 Boring, 1929; Brett, 1912-21; Murphy, 1928; Flugel, 1933.

3 Murphy and Kovach,1972, p3.

4 The literature pertinent to the epistemological questions is venerable and massive. I will simply single out three axes which have been important to the approach adopted here. Firstly, the (mainly French) criticisms of the conception of the presence of an object to knowledge, from Saussure's linguistics, the work of Bachelard and Canguilhem discussed in Chapter Two below, through Althusser (1970) to the writings of Derrida (1975) and the different approach of Foucault discussed in the next chapter. Secondly the (largely anglo-saxon) debates on the history of science, which alll in some ways focus upon the work of Thomas Kuhn (1970). Thirdly the (philosophico-anthropological) debates on the universality of reason and the issues of relativism and rationality, as represented, for instance, in the collections edited by Wilson (1970) and Hollis and Lukes (1982). Richard Rorty (1980) provides a recent discussion and criticism of correspondence theories of truth.

5 Lecourt, 1975, p167.

6 Canguilhem, 1968, p21; quoted in Lecourt, 1975, p168.

7 These terms come from Bachelard. See in particular, Bachelard, 1951 and the accounts given in Lecourt, 1975; Gaukroger, 1976 and Bhaskar, 1975.

8 See especially Canguilhem, 1977.

9 In particular I will not discuss the rather fruitless recent attempt to apply Kuhn's notion of scientific revolutions to the history of psychology. See Palermo, 1971; Warren, 1971, Weimer and Palermo, 1973; Weimer, 1974.

10 See, for example, Popper, 1972; Lakatos, 1971.

11 See the discussion in Barnes, 1974, Ch. 5, for a clear account.

12 Cf Bloor, 1976, Chs 1 and 2.

13 Cf Williams, 1975.

14 The most explicit statements are in Barnes, 1974 and Bloor, 1976. This approach is reviewed in Lukes, 1975; Meynell, 1977; Millstone, 1978 and Freudenthal, 1979.

15 Bloor, 1976, pp 2-3.

16 The same conclusion is reached, by a very different route, in the texts cited in note 6.

17 Bloor, 1976, pp 32-39.

18 Ibid, Ch 4.

19 In my discussion of 'interest explanations' I have benefited from the critical arguments advanced by Woolgar, 1981, although I differ from the position adopted there about the pertinence of ethnomethodology for future work in the sociology of science. I have also drawn on the criticism of the notion of interests put forward by Hindess, 1982. Barnes, 1981 and MacKenzie, 1981b, in their reply to Woolgar confirm, rather than resolve, the difficulties in their approach.

20 MacKenzie, 1981a, p 129. See also MacKenzie, 1976. Other examples of explanations in terms of interests in the area which concerns the present study are the contributions of MacKenzie, Norton and Searle to Past and Present Society, 1978; and the works cited in notes 21 and 22 below.

21 Shapin, 1975; Harwood, 1976; see also Shapin and Barnes, 1979 and other papers in Wallis, ed, 1979.

22 Barnes, 1977, p38; this position is further developed in Barnes, 1982, especially Ch 5.

23 Op cit, n20, p225.

24 Rose, 1977; Hirst, 1979, Ch 4; Cutler et al, 1977, Ch 11; Hindess, 1982.

25 For an introduction to the recent radical inflection of this venerable sociological concept, see Watkins, 1975; for its use in histories of welfare see Donajgrodski,1977; for contemporary analysis see Simpkin, 1979; for its use in the field of education see Johnson, 1970. For psychiatry, see Ingleby, 1981, especially the paper by Conrad and, for an historical account, Scull, 1979. Most radical texts in this field tend to use the notion of social control in an off-hand manner, even when it does not appear as a central concept for their arguments. I have made some of the arguments which follow elsewhere: cf Adlam and Rose, 1981.

26 The clearest example of this type of approach is Szasz; see for example his 1972 and 1973.

27 Szasz, 1973; Zilboorg, 1941.

28 Rosen, 1968, p169.

29 A useful recent compilation of evidence and discussion is Hirst and Woolley, 1982.

30 See, for example, Scull, 1979; Conrad, 1981; Conrad and Schneider, 1980; Schrag and Divoky, 1981. This view is widely promulgated in a range of 'radical' texts, both on deviance and

social policy.

31 cf Scull, 1974; Conrad and Schneider, op cit.

32 Minson, 1980, p196.

33 Some of these changes will be discussed in less abstract form in the next chapter. For discussion of these questions in relation to the category of 'mental illness' see Adlam and Rose, 1981; Hirst and Woolley, 1982; Sedgwick, 1982; Clare, 1980.

CHAPTER TWO

ARCHAEOLOGY AND GENEALOGY OF THE HUMAN SCIENCES

In the last chapter, I criticised a number of approaches to the analysis of the history of scientific discourses, in particular the human sciences, and the modes of their social existence and functioning. The approach to be adopted in the present study was outlined in the Introduction. In this chapter I will consider the conceptual bases of such an approach. I will proceed through a discussion of the work of Michel Foucault, for reasons which I will now make clear.

From his early Mental Illness and Psychology to his most recently translated text History of Sexuality, Michel Foucault has been concerned with the origin, nature and destiny of the empirical sciences of man.[1] In his early texts, which he designated 'archaeologies', he developed a form of analysis of theoretical discourses which exploded the simplifications and unifications common to sociology, marxism and the history of ideas. The positive achievments of these works form the basis for much of the criticism in the last chapter, and the majority of this chapter will be concerned to set out this approach and its implications. It is, however, Foucault's later writings which have recently had the most impact on the social sciences. These writings, which Foucault terms 'genealogies', analyse the formation and functioning of the sciences of man in relation to political strategies centering upon the health, well being, good order, productivity and tractability of populations and of individuals. Such analyses are influential because they provide the means for a critical attention to the historical emergence and contemporary functioning of what has been termed "the

professional apparatus of health and happiness"[2]. They appear to allow an analysis of the complex machinery of social regulation which has emerged since the nineteenth century in relation to sexuality, to punishment and justice, to pedagogy, to health, hygiene and 'welfare'.

With respect to the human sciences, the crucial term of these analyses is pouvoir-savoir or power-knowledge. The juxtaposition and hyphenation serve to mark the fact that, in these genealogies a symbiotic relationship is suggested between practices of regulation of persons and populations and systematic, codified and organised knowledges of persons and populations. And the use of the term 'power' indicates that, in these accounts, the analysis of the social existence of the empirical sciences links these theoretical discourses on individuals and populations with effects of domination in respect to them. What I shall argue here is that, at least with regard to the questions which concern this study, these genealogical analyses mark a retreat from the radical implications of archaeology, a retreat towards sociology. In this retreat the conditions of possibility, social consequences and effects of truth of the human sciences suffer an analytical reduction: they appear to be functions of the way in which knowledges can be deployed within social and political strategies. And I shall argue that the limitations which this imposes upon the analysis of the human sciences is exacerbated by an ambiguity within the notion of power itself, such that there is a tendency to reduce the specific contribution made by the human sciences to the field of contemporary reality to the repetitive terms of domination.

The human sciences

Perhaps one can begin by asking why it is that Foucault has paid so

much attention to the emergence of those theoretical discourses which take man as their scientific object. In the first instance it is clear that this work had amongst its own conditions of possibility the formulation of a mode of argument which one might term 'theoretical anti-humanism'. That is to say, these texts share with the work of Althusser, Levi-Strauss, much semiology and recent French psychoanalysis, a theoretical interrogation and critique of the category of the subject.[3] These texts participate in the opposition to the central doctrinal support of humanist philosophy which treats man as the origin and foundation of his social world and therefore the locus of its transformation (as in existentialist and sociological versions of phenomenology); as the principle and subject of history and therefore capable of 'understanding' it (man can know history because man makes history, as in the trajectory from Vico to hermeneutics); as the measure upon which a critique may be grounded (as in all the philosophies of reification and alienation). Anti-humanist analyses reject such a philosophy of the cogito, founded as it is upon a unity which is both the subject of thought (that which thinks) and which can potentially take itself as an object, and that of which one can be sure when all else is doubted (cogito ergo sum). Anti-humanism regards such a conception of the subject as a metaphysical illusion and an obstacle to analysis. It rejects the philosophical and theoretical anthropology which underpins the notion of the subject as the empirically synthesising unity which is the locus of beliefs, feelings, emotions, intentions, actions and values. And it criticises the approach which makes the self, as an agent conscious of itself and its own continuing identity, integrity, wholeness, separateness and creativity, the principal term of its analysis of language, of production or of history.

This contestation took a number of forms, but each sought to demonstrate that the apparently originary and unified self was dependent for its existence and operation upon a set of relations which were other than it, which exceeded it, and in respect to which it was consequence rather than cause. But whilst theoretical anti-humanism was content, in the main, to denounce the reliance of humanist philosophy upon the category of the subject and to elaborate theories not so dependent, or to argue that the metaphysical fiction of the subject was both imaginary and eternal, Foucault's approach to the question of the subject took a different tack. Marxism, linguistics and psychoanalysis, the three major protagonists, adopted a realist strategy in their attack on the presumptions of the subject: the reality of the domain addressed - social relations, language, the psyche - is and always has been other than that dreamed of in humanist philosophy. Foucault, by contrast, turned not to truth but to history, towards a sustained and multi-pronged investigation of the historical conditions and consequences of the emergence of man as both a scientific object and as the touchstone and foundation for true discourses. Let me begin with a consideration of the way in which this is done in the group of texts which end with the methodological formalisation of The Archaeology of Knowledge.[4]

The Order of Things closes with these words:[5]

> One thing in any case is certain: man is neither the oldest nor the most constant problem that has been posed for human knowledge. Taking a relatively short chronological sample within a restricted geographical area - European culture since the sixteenth century - one can be certain that man is a recent invention within it. It is not around him and his secrets that

knowledge prowled for so long in the darkness. In fact, among all the mutations that have affected the knowledge of things and their order, the knowledge of identities, differences, characters, equivalences, words - in short, in the midst of all the episodes of that profound history of the Same - only one, that which began a century and a half ago and now perhaps drawing to a close, has made it possible for the figure of man to appear. And that appearance was not the liberation of an old anxiety, the transition into luminous consciousness of an age-old concern, the entry into objectivity of something that had long remained trapped within beliefs and philosophies: it was the effect of a change in the fundamental arrangements of knowledge. As the archaeology of our thought easily shows, man is an invention of recent date. And one perhaps nearing its end.

If those arrangements were to disappear as they appeared, if some event of which we can at the moment do no more than sense the possibility - without knowing either what its form will be or what it promises - were to cause them to crumble, as the ground of Classical thought did, at the end of the eighteenth century, then one can certainly wager that man would be erased, like a face drawn in sand at the edge of the sea.

This text, together with Madness and Civilisation and Birth of the Clinic seek to trace out not the causes of this 'event' but its conditions of possibility, and they carry out this task in rather different ways.[6] The Order of Things examines the emergence of man in terms of the epistemic transformations which made it possible. It seeks to describe what is referred to as the 'positive unconscious' of knowledge - the rules common to a range of theoretical discourses

at a certain moment, rules not present to the consciousness or experience of the scientist but rather which make that consciousness, that experience possible, which constitute its a priori. The Order of Things is the study of this type of rule of formation of theoretical discourse, rules never formulated in their own right but found in widely different theories, concepts and ways of arguing. It is not, then, a question of studying theoretical discourse from the point of view of the individuals who are speaking, or the structure of what they are saying, but the rules which come into play in the very existence of such a discourse, the rules which a statement will have to fulfil if it is to be, at the time when it is written, an instance of natural history, political economy, general grammar or whatever.

The Order of Things argues that the human sciences form in a space which emerges consequent upon a fundamental shift which occurs at this epistemic level at the beginning of the nineteenth century. This shift is traced through marking the correlative transformations in three domains - biology, economics and philology - unlikely choices for those familiar with more convential histories of the human sciences. In the Classical age there was a congruence between theories of language, theories of natural history and theories of wealth and value; in this epistemic formation, man, as an object of systematic theoretical discourse, could not exist. It is the theory of representation common to these discourses which is of central importance, a theory which allows the formation of an unambiguous link between representations and things, in which the scientific truth of objects is equivalent to the construction of a well ordered scientific language, whose ideal form is the reduction of apparent disorder to the harmony of a taxonomy, of a classificatory table:[7]

> The sciences always carry within themselves the project, however remote it may be, of an exhaustive ordering of the world; they are always directed, too, towards the discovery of simple elements and their possible combination; and at their centre they form a table on which knowledge is displayed on a system contemporary with itself. The centre of knowledge, in the seventeenth and eighteenth centuries, is the <u>table</u>.

This relationship of transparency between representations and their objects, such that ordering the former is equivalent to production of a knowledge of the latter means that, for the Classical episteme, the 'problem of man' was simply non-pertinent. The establishment of a classificatory table of species, genera and classes which was the desire of natural history, posed a problem not of life, common to all the animals, man included, but of language to be perfected to be adequate to its taxonomic task. To posit human nature is, paradoxically, to make unnecessary any question of man as the object of theoretical elaboration - man is absent from the classificatory schema and the knowledge that this purveys is dependent upon no subject for its status. Similarly, for eighteenth century economics, money is the representation of wealth and designates it in the process of circulation; the Physiocrats and the Utilitarians share a body of fundamental propositions: all wealth springs from the land; the value of things is linked with exchange; money has value as the representative of wealth in circulation; circulation should be as simple and complete as possible. Here too the place of man is external to the table of wealth, pertinent only in that that which enters into the process of exchange is, or represents, objects of need.

What happens in the nineteenth century to establish the sovereignty of man over the field of discourse, as the subject who

knows and the object of knowledge? In each of these three areas a reversal can be observed, as philology, biology and political economy establish themselves, not in continuity with general grammar, natural history and the analysis of wealth, but in a space outside the horizon of their thought, in a domain of which they could not think. For the modern age man speaks, man resides among the animals, man's labour is the principle of production. The domains of language, life and labour are now subject to their own specific laws and principles and man enters the field of their operation. Yet these laws are no longer the play of identities and differences which may be adequately represented in a classificatory schema or a well made language. They are laws which have retreated to the heart of things themselves, to the organic depths of their positive reality, laws concerning internal relations between elements whose totality performs a function, not a table of unbroken simultaneities but a system of series or sequences on different levels.

The Classical space of Order served as a common place for representations and for things, for empirical visibilities and for essential rules, a common space which made it possible systematically to scan elements contemporaneous with one another. Representations grounded themselves; the organising problem for modern epistemology of the relations between knowing subject and object was not merely not posed - it was not thinkable. In the modern episteme, however, representations have lost their power to provide their own foundation and no analysis or remaking of representations themselves, no construction of a language however unambiguous, can itself justify a claim to knowledge. The possibility of there being links between representations and things is now given in a realm which lies beyond their immediate presence, in a world-behind-the-scenes deeper and

denser than representation itself. The characteristic movement of the modern episteme is not taxonomia but interpretation. The Classical space of Order is shattered; there is now no mode of being which is common to things and to knowledges. On the one hand there are things, with their own organic structures and temporality, on the other hand there are representations addressed to a subjectivity, a "psychological" individual who is trying to know.

It is this fundamental reorganisation in thought and experience which begins to isolate a specific domain proper to man, and begins to make of man the very principle of knowledge, because it is his strivings alone that can penetrate the density of reality and attempt to apprehend and reconstitute its laws in consciousness. This also makes 'man' possible as an object of positivé investigation since he is himself no more than a natural being, subject to those laws which he seeks to reconstruct:[8]

> [Man], with his own being, with his power to present himself with representations, arises in a space hollowed out by living beings, objects of exchange, and words, when, abandoning representation, which had been their natural site hitherto, they withdraw into the depths of things and roll up upon themselves in accordance with the laws of life, production and language. In the middle of them all, compressed within the circle they form, man is designated.

The epistemic configuration which makes possible political economy, biology and philology thus forms the surface upon which the human sciences establish themselves, and, for Foucault, the regional organisation of these sciences retains something of this original tripartite division - 'linguistic' studies of literature, myth, the verbal traces of man; 'sociological' theories of labouring man, the

producing and consuming individual in society; 'psychological' man who represents to himself his experience as a living being. But The Order of Things is not concerned to analyse the emergence of specific discursive formations upon this epistemic redistribution, but with establishing the fundamental conditions under which their emergence became possible:[9]

> There can be no doubt, certainly, that the historical emergence of each one of the human sciences was occasioned by a problem, a requirement, an obstacle of a theoretical or practical order: the new norms imposed by industrial society upon individuals were certainly necessary before psychology, slowly, in the course of the nineteenth century, could constitute itself as a science; and the threats that, since the French Revolution, have weighed so heavily on the social balances, and even on the equilibrium established by the bourgeoisie, were no doubt also necessary before a reflection of the sociological type could appear. But though these references may well explain why it was in fact in such and such a determined set of circumstances and in answer to such and such a precise question that these sciences were articulated, nevertheless, their intrinsic possibility, the simple fact that man, whether in isolation or as a group, and for the first time since human beings have existed and have lived together in societies, should have become the object of science - that cannot be considered or treated as a phenomenon of opinion: it is an event in the order of knowledge.

No doubt a number of objections can immediately be raised to such an analysis. Certainly the tendency towards totalisation in the notion of the episteme - giving it something of the status of a

Weltanschauung - is unwarranted, but neither is it a necessary part of such an analysis. The global terms of Classicism and Modernity, and the notion of a single general rupture between them, might do useful discursive and organisational duty for a time, but they should not be taken too seriously and certainly not made the principle of any analysis. But another set of linked questions were most often put to The Order of Things: what were the conditions for this enigmatic yet fundamental transformation - how does change occur and what are its causes; what are the links between discourses - their form and transformation - and social relations more generally? Of course such questions were most frequently posed by those attempting to refight the heroic battles of the nineteenth century between 'materialism' and 'idealism'.[10] But in seeking to characterise Foucault's work in terms of this venerable opposition, they mistook the point at issue.

In his comments appended to the English translation of The Order of Things Foucault states that, in this text, he deliberately laid to one side the question of causality in respect to transformations in order to concentrate on a description of the transformations themselves, which he considered an essential precondition for the construction of a theory of scientific change and epistemological causality. Yet it would be a mistake to believe that such an approach, or the distinction between knowledge and opinion put forward in the passage quoted above, was effectively signalling an elementary differentiation into levels or orders, ontologically given and hierarchically organised. It is rather an analytic distinction designed to free a certain group of phenomena for analysis without posing too rapidly certain repetitive and intractable problems concerning the relation of 'knowledge' to

'reality', the determination of ideas etc. And partly, too, it is a polemical choice, designed to free a domain, that of theoretical discourse, for an analysis in terms of its own internal rationalities and modes of functioning without reducing it to a stage upon which a play is acted out whose plot is written elsewhere - in the forms of economic organisation, in the minds of its authors, in the nature of the 'real' objects themselves. Yet, in freeing this domain, a series of radically new ways of addressing these traditional problems is opened up. These may be briefly illustrated with reference to Madness and Civilisation and Birth of the Clinic.

Madness and Civilisation is not a history of madness, of attitudes to madness, of ways of treating the mad, or even a history of psychiatry. What the book attempts, as has been pointed out elsewhere, is to describe the conditions of possibility for the emergence of psychiatry, and the correlative constitution of madness as a scientific object and as the 'reality reference' for a range of technical and institutional practices in respect of those so designated.[11] Madness and Civilisation is concerned with the characteristics of the internal organisation of this theoretico-practical space, with its regularities in terms of the theories which circulate, the deployment of concepts and explanations, the forms of treatment, the relations between doctors and patients, the types of institution and their organisation, the relations established with other theories and practices. But this space, and the range of tactical options possible within it, is regarded as largely mapped out by the conditions which made it possible. The rationality of the theoretico-practical space of psychiatry is thus seen as established by the conditions of possibility for the formation of psychiatry. What are these conditions?

Central to the argument is that psychiatry, as a practice in

which madness is constituted as a proper object for rational scientific discourse and for medical techniques and practice, emerges in the nineteenth century as a consequence of transformations in a variety of social fields many of which had little or nothing to do with madness itself. Consider the 'founding moment' of modern psychiatry, Pinel's liberation of the insane in Bicetre, 1793. Most histories of psychiatry see this as a gesture at one and the same time of humanisation, the recognition of the essential humanity which the mad share with the sane; of scientisation, the start of a scientific as opposed to religious or ethical approach to madness; of medicalisation, the recognition that madness shares something with diseases of the physical body and hence is mental illness; and of institutionalisation, the formation of the modern medicalised asylum, the mental hospital.[12] This shift into modernity is regarded as the outcome of the application of newly enlightened medical thought to the given problem of insanity. A transformation in medical ideas, and more generally the displacement of religious beliefs by scientific rationality at the level of philosophy, produces a transformation in treatment, in institutional care, in understanding.

In Madness and Civilisation madness becomes a possible object for medical practice and a reformatory therapeutic regime as a result of transformations of a rather different order. Legal changes in France at the time of the Revolution made detention unlawful except in respect of specific crimes and as a result of definite legal procedures, thus posing a specific problem for the mad who could neither be released nor easily be assimilated to criminals. Medical nosologies, in systematising the conditions with which doctors dealt, categorised the mad as both distinct from, and within, the field of medicine, with a definite symptomatology, aetiology and prognosis.

The 'moral treatment' developed by Tuke at the York retreat, inspired by a particular ethical stance, appeared to demonstrate the possibility of reformation of the insane through a regime of enforced moral conformity, maintained by the systematic application of sanctions and rewards, and directed towards the soul present in all. Condillac's empiricist philosophy provided the means to displace the religious notion of morality into that of a moral space internal to each subject and amenable to transformation through the systematic regulation of experience. This created a new role for the traditional devices of medicine in respect to madness - bleeding, purging, spinning, bathing - and gives a specific <u>therapeutic</u> rationale for confinement: the asylum became the only adequate regime for the treatment of insanity because only there could the conditions of experience be rigorously and continuously supervised. The therapeutic rationale for confinement creates the possibility for the modern mental hospital, annexed to medicine partially through the theoretical alliance struck in the nosologies, partly through the re-utilisation in the asylum of the old medical treatments for new purposes, partly because of the authority which the intellectual, social, therapeutic and legal status of the doctor conferred upon the post of asylum management in respect both to the field of politics and the compliance of patients.

The shift thus documented was conditional upon transformations in diverse areas, in relation to diverse concerns and obeying diverse chronologies. Together they formed a space within which the new problem of madness could take shape, and within which a new range of strategies and tactics could be deployed. These conditions, whilst certainly in many cases directly 'political', cannot be reduced to a general political constraint exercised by 'capitalism', the development of the market, the need for a healthy workforce, any more

than they can be seen as fundamentally a shift in philosophy or Weltanschauung - the rise of positivism, or scientism, or the 'medicalisation of social problems'. Archaeology refuses to operate in terms of a general ontological distinction beween a realm of 'ideas' and a realm of 'practices', or to take up a position within the philosophico-political paradigm which opposes 'idealism' to 'materialism'. But whilst no general question of causality, determination, or articulation is posed, the analysis always seeks to specify in the most precise terms the relations which obtain between different sorts of events and processes - in theories, in institutions, in morality, in the organisation of production, in the machinations of political forces.

A further example, this time from Birth of the Clinic will clarify this point. This concerns neither the possibility of an empirical science of man, nor a specific discourse and its objects, but a formation which is both a theoretical category and a technical practice - the case. Clinical medicine depends upon the notion of the case - the unique intersection between a body, a life history and a condition - as the proper object for medical knowledge and the practice of the cure. The case designates, in part, a particular relation between subjects in the practice of clinical medicine, a particular disposition of medical agents in relation to their patients in consulting room, ward, surgery, lecture theatre and textbook. Recent political accounts of the history of medicine tend to treat this notion of the case as a consequence of the emergence of positivist philosophy, as a sign of reification - the treating of persons like things, subjects like objects - characteristic of capitalist societies, as a manifestation of the fact that persons are only important for capitalism as equivalent, interchangeable labour

power and their uniqueness and individuality is of no concern.[13]

The analysis in Birth of the Clinic demonstrates in contradistinction that the formation of the case certainly was conditioned by social and institutional changes, was certainly 'political', but that the conditions of its emergence were dispersed, complex and non-intentional. Crucial was the emergence of the hospital in the context of increasing urbanisation and industrialisation, and also as a result of a change in the laws of assistance which made institutionalisation a condition of medical treatment for those in receipt of relief. Hospitalisation of the sick allowed a change in relations between doctors and patients such that doctors could now observe a whole series of instances of any particular condition, making possible the tabulation and statisticalisation of diseases and the development of classifications and diagnoses based on the link between symptoms and prognoses, between symptoms at different levels, between individuals, and between successive events for any one individual. Changes elsewhere resulted in new criteria to designate those who receive by law the right to hold a medical qualification and the formation of a new method for transmitting medical knowledge whereby the poor, benefiting from the care they receive for free, compensate through the medical lesson they provide. The case, then, certainly implies a new relation between doctor and patient but nothing much can be learned of its conditions or consequences from the mode of critique adopted by so many of its recent investigators.[14] The relations which archaeology seeks to analyse are those reduced or obscured by the methodologies criticised in the previous chapter.

Archaeology

The Archaeology of Knowledge seeks to clarify, formalise and develop

the methodological and analytic protocols for these analyses.[15] Archaeology is a technique for the analysis of the conditions of appearance and transformation of regular bodies of statements, termed discursive formations. The mode of existence of such regulated bodies of statements is within discursive practices and archaeology seeks to describe their rules of formation, the rules which govern the functioning of regulated, individuated and describable bodies of statements.

It is relevant to provide an exposition of some of the main features of archaeology for two reasons. Firstly, in order to set out the basis for the earlier criticisms of currently available ways of analysing the nature and social existence of scientific discourses. Secondly because the theses of archaeology provide the analytical guidelines for much of the substantive analysis undertaken in the present study. This is not in the sense that I would claim my own investigations to be a realisation or application of the protocols laid out in The Archaeology of Knowledge (any more than, in fact, are Birth of the Clinic, or Madness and Civilisation, or The Order of Things). It is rather that the considerations developed in The Archaeology of Knowledge provide the orientation for my own study, suggest the sorts of questions which it asks, and supply many of the analytical tools which it uses. These will be drawn together at the end of this chapter. To the extent that the account here provided is selective, this selection attempts to bring out points which are of particular significance for what follows.

The domain of investigation of archaeology is the archive. The archive is a level somewhere between the grammatical rules of a language and the collection of words spoken, it is the level within which operates a system of formation, preservation and transformation

of statements. The archive consists in a multiplicity of statements organised as regular events. Archaeology seeks to describe the regularities governing these statements, and to specify the modifications which they are able to undergo. Statements can come into existence and enter into relations with one another only under certain conditions, conditions which are termed an historical a priori. A priori because it is the very condition of possibility of a certain order among statements, the ground and the horizon from within which they can be formulated; historical because it is itself mutable. When we recognise in the texts of, say, Broussais and Bichat, that they are 'talking about the same thing' or that they are disputing over the same questions it is because the statements which make up their texts operate upon the same a priori; when we see no possibility of a debate between Diderot and Darwin it is because the a priori which makes Darwin possible differs radically from that which grounds Diderot.

The historical a priori is what Foucault refers to as a positivity. It is not a deep or hidden level of meanings or intentions of individual or collective subjects, nor is it the foundation, origin or purpose of statements; it is merely the regularity that characterises the form of their actual existence. Archaeology thus attempts to individuate a group of statements in terms of the regularity of their dispersal through a description of the rules immanent within it. If linguistics since Chomsky has based its theoretical revolution on the proposition that a finite number of transformational rules can generate an infinite number of grammatical sentences, archaeology could be said to differ in at least two respects. Firstly, its objective is to describe the rules that make possible a certain rarity of statements - not all which could have been said but only those statements that did, in fact, come into

existence. Secondly, these rules do not exist behind, below, beneath or before the regime of statements they make possible - archaeological description does not uncover a 'deep structure' but operates at a superficial level. There is not something beyond statements that is embodied in them - archaeology seeks to remain at the level of the statement itself. The rules which it seeks to describe are those through which actually existing statements do relate to one another within a particular discursive formation. And, correlatively, a discursive formation can only be identified if such a description is possible.

Similarly, the archive which is pertinent for archaeological analysis is itself determined by the statements that make it up. It is neither a question of accepting the partitioning of statements according to conventional disciplinary boundaries, nor of limiting an archive by reference to a particular sector of reality which it might be deemed to be attempting to explain. Statements themselves, through their systems of reference and address, through the other statements which they take into account or distance themselves from, through the forms of connection which they themselves establish, define the scope and limits of an archive.

At the risk of repetition, it is necessary to stress the type of analysis involved here. It is, first of all, non-interpretive. The rules which it identifies do not generate statements from without, they do not refer to the truth of what is being expressed. They are rather a means of description of regularities as, when, and where they appear. Archaeology is thus very different from the way of analysing texts which terms itself <u>criticism</u> or <u>critique</u>, as it has developed from German biblical criticism through Hegelian and Marxist philosophies of history. It is critique which is currently

so popular as a radical technique which seeks to interpret back through discourses to reveal the social and political concerns which animate them, the structural relations which determine them, the functional exigencies which motivate them, the hidden causes which alone are believed to make discourse intelligible.

Further, archaeology is non-anthropological. It is not an hermeneutics and does not seek to return from these statements and traces to the intentions of the authors who spoke them, to recover the meanings which subjects embedded within them or the experiences to which they are linked. For this is another interpretive mode of analysis which analyses discourses by seeking to uncover or recover that which was originally hidden within them.

Archaeology, as we have seen, operates at the level of the statement. Statements may be linguistic, and indeed this is their principal form. But they may also be maps, plans, diagrams or tables of numbers. A statement is the form of organisation of signs appropriate to discourse - it is the way in which signs exist as more than mere marks, traces or objects. Foucault uses the term 'enunciative function' to designate the way in which signs are distributed into systematic and organised bodies of statements. As we have seen, this does not lead into an analysis of the meaning embedded in signs, the activity of the individual who spoke them, their propositional structure or the unique combinations of signs which make up utterances. On the contrary, what is involved is a way in which signs are related to a field of objects, the positions established between subjects in a discourse, the relations between one statement and the others of that discourse, the repeatability and strategic potential of statements. These make up the four directions along which archaeological analysis proceeds. Archaeology seeks to describe discursive practices in terms of the rules of formation of

objects, enunciative modalities, concepts and strategies. I will consider each in turn.

Archaeology denies that the given or constituted unity of an object is what identifies a discursive formation. All those statements concerning madness in post-revolutionary France could not be characterised by the singularity of that to which they referred. Certainly not in the sense that there was some real, external state of affairs which discourse, more or less adequately, expressed or grasped. But archaeology is not content to repeat the wisdom, becoming conventional, that the object of a theoretical discourse is constituted internally to that discourse through the operation of its concepts and their forms of connection. Rather, for a discursive practice, say concerning madness, to be individuated, the rules which specify not a single object but a dispersion of objects must be described. Madness in a court of law is not the same as madness for medicine, which differs again from that which concerns the police. But if a discursive formation is to be individualised, this variation of objects must be systematic and delimited, and describable in terms of certain rules of formation of objects.

What is at issue here is not so much a regularity in the objects themselves but in a certain way of forming them. To describe the rules of formation of objects is to describe the way in which a systematic set of relations are established between three types of elements. Firstly what archaeology terms the 'surfaces of emergence' of objects, the practices within which they are designated and operated upon. Family, work, religion, artistic, sexual or penal practices and many more - all or any of these may be the loci within which particular objects of a discursive practice may be thrown up. Secondly, certain authoritative institutions - medicine, the church,

the law and so forth - act in relation to this grouping of objects as authorities of delimitation of these objects, competent to name them and pronounce upon them. Thirdly, there is a certain way in which objects are specified, divided, related, classified and differentiated. A way which concerns not the details of a conceptual armoury but the general divisions within which appropriate objects may be organised - the division, say, between body and soul, or between physiology and life history. "Institutions, economic and social processes, behaviour patterns, systems of norms, techniques, types of classification, modes of characterisation" (p45) offer discourses the objects of which they can speak, or rather "determine the group of relations that discourse must establish in order to speak of this or that object, in order to deal with them, name them, analyse them, classify them, explain them etc" (p46). An analysis of discursive practices would thus first of all take the form of a specification of the rules of formation of objects in terms of the surfaces on which they appear, the way in which they are delimited, the way in which they are specified and differentiated. We have seen how the analysis undertaken in Madness and Civilisation is predominantly of this type.

Birth of the Clinic, on the other hand, is principally concerned with a second direction of analysis, the new positions for subjects established with the formation of clinical medicine in the early nineteenth century. In The Archaeology of Knowledge, this analysis of the possible places which may be occupied by subjects within a discursive practice is conceived in terms of the rules of formation of enunciative modalities. These concern the regularities in statuses, sites and positions of subjects. Statuses: who is empowered to make a medical statement and in what ways. Sites: from whence does a medical statement derive its legitimacy and point of

application - the hospital, the private practice, the laboratory, the library. Subject positions: the possible relations between subjects and subjects, subjects and objects, subjects and techniques - teaching, observing, examining, diagnosing, operating. Not a subject with its unity of intentions and meanings but a dispersal of possible positions which individuals must occupy if they are to enter into a particular discursive practice. The same individual may occupy a number of distinct positions, different individuals might occupy the same position, but the choice, character, scope and possibilities are features of the practices themselves. As was the case for objects, there are a set of conditions of possibility for a discursive formation which are themselves neither adequately characterised as discursive or as non-discursive.

If the rules of formation of objects and enunciative modalities form, in some respects, a space of exteriority in relation to a given regime of statements, the rules according to which concepts are formed are the very texture of the field of statements itself. To constitute a discursive formation, statements must be organised according to describable rules of succession, coexistence, construction and circulation. Thus The Order of Things, which concentrates upon an analysis of this type, seeks to lay out the regular modes of derivation, validation and verification of statements, the structures of possible explanations, the nature and role of evidence and so forth in the domains of language, life and labour. It seeks to demonstrate a congruity in these rules across these three domains. It also tries to show that there are such fundamental transformations in these systems of rules between discursive formations that it is necessary to conceive of a radical discontinuity between them. No continuity, for example, can be

established between Aldrovandi's History of Serpents and Dragons written at the beginning of the seventeenth century and Jonston's Natural History of Quadrupeds written only a few years later. This is not a matter of the formal structure of the discourse, the logical status of its arguments, the epistemology it espouses or the methodology it utilises. Still less is it a case of an increase in knowledge or a new dedication to observation. It is rather a transformation in the rules which groups of statements will have to fulfil if they are to form possible concepts of a particular discourse.

The fourth direction of analysis proposed concerns strategies or thematic choices - the linking together of certain objects, concepts, modes of enunciation into recurrent themes such as that of an original language, or the circulation of wealth on the basis of agricultural production. Strategies are selections, amongst all the possible combinations opened up by the rule of a given formation, of certain options rather than others within the space available. To define the formation of strategies is to describe the links which obtain between the different choices made within the set of possible concepts and to relate these to more general constellations of discourse, such as those outlined in The Order of Things. But it is suggested that it is also necessary to describe strategies in terms of a different set of relations. Thus Foucault argues that the strategies deployed in the analysis of wealth in the seventeenth and eighteenth centuries must be examined in relation to "how these choices are linked to the function carried out by economic discourse in the practice of emergent capitalism, the process of appropriation of which it is an object on the part of the bourgeoisie, the role that it can play in the realisation of interests and desires" (p69). But again it is not a question of something anterior to discourse -

world views, interests, opinions - being more or less hypocritically translated into a selection of theoretical positions. Strategies are systematically different ways of treating objects of discourse, forms of enunciation, regularities of concepts, working not prior or posterior to the rationality of a discursive formation but on its surface as part of its very fabric.

It is, however, the case that strategies are extremely ill specified in The Archaeology of Knowledge, and that the account which is given is ambiguous and contradictory. It is almost as if there were a pure body of discourse which was then linked to external exigencies - "a whole non-discursive field of practices, appropriations, interests and desires." (p69). Such an argument threatens to return to the positing of a separation and relation between two general realms, of discourse and non-discourse, which we have already criticised, and from which archaeology promises an escape. If one turns to Madness and Civilisation or to Birth of the Clinic, however, one can observe that strategies in archaeology entail no such separation. Strategies entail the immediate engagement of theoretical options within a practical field - of research and experimentation, of pedagogy and reform, of investigation and record keeping, of the organisation of architectural space and time. It is upon the question of such strategies that Foucault's later genealogical works concentrate. Let me delay further discussion of this issue until our consideration of these texts.

Archaeology certainly does not constitute a systematic machine for the analysis of discourse, nor does it attempt a formalisation of discourses in terms of the problematics which underlie them or the

combinatories to which they may be reduced. It is perhaps best seen as a means of opening up a set of questions in the analysis of the formation and functioning of theoretical discourses whilst, at the same time, avoiding a number of familiar pitfalls. It is worth briefly enumerating the challenges which archaeology poses to sociology, marxism and the history of ideas, before enumerating the questions which it places upon the analytical agenda.

Firstly, it explodes the great unities that form the categories of historical analysis in the history of ideas - Weltanschauung, the evolution of ideas, oeuvre, the division between the traditional (which only repeats what has already been said and is therefore intelligible in terms of what it shares) and the original (the text without ancestors which points forward to a new future and, in relation to the regular, can only be deviant). Where the history of ideas sees unity, archaeology sees a regulated dispersion, where it sees the sudden spark of innovation, archaeology sees rather an effective field for the appearance of statements in which the frequent and the infrequent equally follow forms of regularity.

Secondly, it dispenses with the stabilising influence of the object. What enables the history of ideas to construct the tale it tells as a continuity is the givenness of an extra-discursive object. This performs a number of functions for the analysis. It enables the grouping together of statements at different times and with different points of appearance into a unity and continuity in that what they share is the reference towards which they strive. The stability of real bodily illness, for example, would provide the means of linking together statements which sought to speak of it at different times and in different cultures as medical. And further, the reality and stability of the object provides the means for organising statements along a single dimension according to how accurately they speak of

it, how close they come to grasping its essence. We have seen how archaeology challenges this givenness of the object, and with it the modes of analysis which the assumption of stability makes possible.

Thirdly, it disrupts the opposition of truth and falsity, an opposition which marxist accounts of theoretical discourses and their history share with their 'bourgeois' opponents. We have seen how the history of ideas organises and evaluates statements in terms of such a division, which provides a means both of categorising discourses and suggesting something of their relation to social conditions. Falsity is a consequence of the incursion of extraneous social factors into science where they act as obstacles or as active distorting agents - religion, prejudice, social interests and desires can all enter scientific practice only at a cost to its truth. And where one sees the social deployment of theoretical discourse for practical and political ends, there too, according to these accounts, one has good grounds for suspecting that one is dealing with a pseudo-science. The move towards science is at one and the same time a move towards truth and objectivity, towards independence from social conditions and the mundane interests of the world of opinion, towards neutrality in respect of political motivations and utilisability. False knowledge internalises its conditions of utilisability and deployment within the discourse; for truth, utilisation is external to knowledge and, in the case of evil ends, is a distortion, misappropriation or recuperation of it.

The division and opposition between science and ideology in marxist accounts of theoretical discourse operates in a rather similar way. Whatever the particular account provided of the character and criteria of scientificity, discourses are inevitably divided into those which conform with such criteria and those which

do not. If the former are considered scientific on account of their veracity, the latter are considered ideological because of their departure from truth. It is the falsity of those discourses designated ideological that enables their deployment for the ends of legitimation, mystification, social control, reproduction of capitalist relations of production or whatever. The designation of a discourse as ideological is only possible when undertaken from a position outside ideology, for it is only science that can reveal the claims of ideology to be false.

The designation of a discourse as ideological, in marxist accounts, is more than a judgment on its epistemological status. It entails conceiving of it as an element in a domain which is unified in that its characteristics and organisation are the effects or representations of social processes conceived of as more fundamental. Particular ideological discourses are regarded as having developed at a particular time, and with a particular form, as a consequence of the determination exercised upon social phenomena by economic relations. The characterisation of a discourse as ideological thus serves both as an explanation of the social existence and functions of that discourse and as a critique of it on the grounds of its falsity. Critique is the confrontation of the falsity of ideologies with their reason and their truth. And for the critique of ideology it is the falsity of a theoretical discourse which enables it to perform its reactionary social functions and, correlatively, one might suppose it to be the truth of science which founds its progressiveness.

Archaeology refuses this division and evaluation of discourses according to an epistemological conception of truth. It refuses also the position which would denounce a discourse as false on the basis of the social conditions which allowed for its formation, or the

social effects which it made possible. To say its account of theoretical discourse is non-epistemological is not to say that it is unconcerned with truth. But rather than utilising truth as an independently available criterion for the evaluation of discourse, and rather than seeing truth and social functioning as somehow opposed, archaeology recognises that if discourses function socially it is not on account of their falsity but rather because it is in and through them that effects of truth are produced.

In this sense archaeology clearly links to the studies of the histories of the sciences undertaken by Gaston Bachelard and Georges Canguilhem.[16] For in these studies too, the history of a science is not conceived as a progress from falsity to truth, nor are theories and concepts distributed and divided in terms of any philosophically legitimated epistemological criterion of truth/falsity. This is not merely a disdain for that conceit which allows philosophy to assert the right to adjudicate upon the claims to scientificity of any particular discourse. It is also because to understand the history of a science it is necessary to recognise that sciences themselves are discourses continually seeking to adjudicate upon their own truth claims in terms of their own criteria for truth. For one crucial thing about scientific discourses is the way in which they function in terms of a division between truth and falsity. Scientific discourses, for Bachelard and Canguilhem, are not 'true' discourses, they are 'veridical' (or 'truthful') discourses, discourses governed by a norm of truth, discourses whose desire is to speak the truth. Each scientific discourse, at each moment in its history, produces its own specific norm of truth, and means by whic that truth can be evidenced,in relation to which it engages in a practice of critical rectification of its concepts and theories. It is this fundamental

relation to truth which characterises a practice which is scientific, but it is a conception of truth, and of the appropriate forms of evidence and demonstration which accompany it, established internal to that scientific practice. The historiographer of the sciences is thus an historian of truth itself, where truth is inscribed neither in things nor in the intellect, but in the organisation of the statements of a science into a discourse subject to continuous critical rectification according to an historically specific norm of truth.

The question of truth, as it is posed in archaeology, is in the same vein. Theoretical discourses establish, as a consequence of the rules which govern them, what Foucault later terms a 'regime of truth'.[17] The question for archaeological analysis is not one of the evaluation of this regime in terms of some other conception, either substantive or methodological, derived from the current state of knowledge or from a particular philosophical commitment. It is rather one of examining how, for a particular discursive formation, this regime of truth is set up, what it entails in terms of what is to count as evidence, explanation, proof or disproof. But also, and in this sense going beyond the internal organisation of a body of statements, how this regime of truth sanctions certain subjects as competent to pronounce upon it, is implicated in therapeutic, experimental and institutional practices, operates in relation to a certain domain of objects. That is to say, archaeology is concerned with the conditions which statements will have to fulfil, within a given discourse, if they are to be 'in the true', and the means and consequences of the production in discourse of the effects of truth.

It is not only on the grounds of truth that archaeology opposes ideology, but also because of the conception of ideology as a bounded and unified domain upon which a determination is exercised by

processes of a more fundamental nature. Such a form of analysis is rejected, as we have seen, on a number of grounds. First because it would seek to interpret discourses as a level of expression to be analysed by a process of critique. Second because it would reduce the operations of discourses to, at the most, variant means of fulfilling functions prescribed elsewhere. Third, because discourses could never be more than registers of effects. To reject the ideology/economy couple, and the philosophical notion of determination upon which it depends is not, of course, to argue that there is a realm of 'Discourse' which is free floating, autonomous, undetermined. Discourses do not constitute a 'realm' and are not analyzed in terms of any general ontological distinction between ideas, language, signs, representations on the one hand and material, real or economic processes on the other. In this sense archaeology could be regarded as working on the limits of the modern episteme as Foucault himself has analysed it. Discursive practices are conceptualised in terms that simply are not divisible according to the distribution which forms the horizon of most 'modern' epistemological thought. And in terms of what it makes possible, archaeology opens up the possibility of conceiving of connections, dependencies and determinations which are more limited, more direct and more specifiable than those assumed in explanations in terms of some general conception of determination. For references to economic exigencies, functions or needs are never able to identify or specify the mechanisms through which these are transformed into a particular organisation of statements, except through the explicit or implicit postulation of a subject who recognises these economic necessities and more or less cynically produces an appropriate discourse. And references to 'interests' either require the postulate of a similarly

equipped calculating subject who recognises them and acts accordingly, or else are reduced to postulating something like an elective affinity between a theoretical form and the social position of the theorist, again without being able to specify any mechanism of realisation of these 'objectively' determined interests in discursive form. In displacing the central oppositions which underpin these explanatory failures, it is archaeology, and not its critics, which opens up the possibility for an instructive examination of the relations between the internal structure of a regime of statements and its social and political conditions.

Finally, the category of the subject. Archaeology certainly attempts to free the analysis of discourses from those reductions of them to expressions of the beliefs, intentions, motives or interests of the subjects who speak and write. But it does so not to expel the questions of subjects speaking, writing, acting, but to allow analyses of how certain activities of subjects become possible. The biographical studies of milieu and influences which make up much of the history of ideas may, no doubt, explain why this rather than that individual came to write a particular treatise. But they would see only factors of time and influence in the fact that, for example, Galton's texts were not written in the eighteenth century. Similarly, historical accident would account for the loss and rediscovery of Mendel's 'revolutionary' findings. It is not that biography, or even personality, is unimportant for archaeology. Characteristics of individuals can, however, determine only how something was thought, not explain that which made it possible to think it.

So archaeology denies the primacy of the object, re-poses the epistemological question of the relation between truth and falsity, fragments the ontological division between words and things, breaks

up the problem of 'determination in general', and removes the privileges accorded to the subject who speaks. It does so not in a negative gesture, but in the course of opening up a range of new questions to be posed concerning the formation and functioning of theoretical discourses. The questions which it places upon the agenda will be those which will concern us in this study of the birth of the psychology of the individual. But first, a few words are in order as to why the approach to be adopted draws principally upon archaeology rather than genealogy.

Genealogy

In many senses Foucault's later studies - Discipline and Punish and History of Sexuality - continue and clarify the methods and aspirations of archaeology. For our present purposes, this clarification is in two areas. Firstly, in relation to the type of historiography which is proposed. And secondly, in relation to the issue of strategy.

Perhaps one can approach the first of these questions by asking how fields of investigation are specified and conditions of possibility delimited. The arguments in the Order of Things and The Archaeology of Knowledge sometimes give the impression that archaeology seeks to provide a description of a domain of events which presents itself to the historian as an historical fact. The explicit designation of the later studies as genealogical indicates that Foucault is not a latterday Ranke, seeking to show "wie es eigentlich gewesen" (how it really was). Genealogies are historical investigation undertaken from a particular point of view - the point of view of the present. They do not wish to produce a progressive history which demonstrates the inevitability of the lines of

development which have led up to the present in terms of enlightenment, rationalisation, modernisation, bureaucratisation or whatever. Rather they try to trace back from a problem prioritised from a certain position today, to discover the varied and unlikely elements which entered into its formation. Thus genealogical investigation seeks to disturb, to fragment, to reveal heterogeneity where unity had been supposed, dispersal where we imagined solidity. It reveals that our present has its conditions of possibility in a variety of unexpected elements, objects and surfaces:[18]

> to follow the proper course of descent is to maintain passing events in their proper dispersion; it is to identify the accidents, the minute deviations - or conversely, the complete reversals - the errors, the false appraisals, and the faulty calculations that gave birth to those things that continue to exist and have value for us; it is to discover that truth or being do not lie at the root of what we know and what we are, but the exteriority of accidents... The search for descent is not the erecting of foundations: on the contrary, it disturbs what was thought unified; it shows the heterogeneity of what was imagined consistent with itself.

This discussion makes clearer the approach to history which the archaeological studies adopt. Starting from a particular way of thinking as acting in relation to human beings - clinical medicine, madness as mental disease ... - archaeology asks the question 'how'. Not why, but how, by what means, in relation to what events and problems did it become possible to specify and act upon human beings in this way, through what techniques and with what consequences. This is what is implied by an analysis of conditions of possibility. It is true that, in principle, such a specification of conditions

could never justify a claim to exhaustivity, and nor does it make one. The pertinence of particular conditions is established in terms of the discursive practices under consideration - in terms of the problems which they address, the objects which they bring into relation with one another, the institutions which they form and circulate within, the authorities which enunciate them and which they, in their turn, designate as competent and so forth. Conditions of possibility are thus established by examining the elements which are actually linked up within a discursive practice, rather than through the interpretative methods of hermeneutics or critique. And they are established from the perspective of a problem and with the objective of seeking to make it intelligible. That much the later studies share with the earlier ones.

Secondly, these later investigations clarify the conception of strategy which is so ill-defined in The Archaeology of Knowledge.[19] In marxist analyses, like many others, strategies emanate from particular agents - individuals, classes or other entities - who are accorded certain interests. Strategies are the means by which agents act upon social relations in order to realise objectives which conform to their interests. The origin of a strategy in a unified entity confers a unity upon its elements and tactics, and their strategic nature is a consequence of their being expressions of calculations engaged in by this unified entity in order to realise its will. In genealogies, the unity of a strategy is not a unity of origins, of interests, or of calculations. Strategies are unified at the level of objectives, the discursive configuration which provides the rationale for the specification of such objectives, the relations established amongst the objects of a discursive practice and the subjects positioned by it. A strategy, that is to say, is a field of

elements oriented to the production of particular effects. Whilst a strategic field may include within it the more or less conscious calculation and tactics of agents and social forces, it is the outcome of the interaction between them, and also includes the 'unintended consequences' of actions, and the possibilities established or precluded by the intersection of widely dispersed practices. In this sense strategies may be regarded as intentional but not subjective. They tend towards the realisation of certain objectives as the resultant of the interplay of genuinely dispersed elements and tactics. Strategies may be individuated in terms of the effects they seek, the techniques they use, the the agents and modes of conceptualisation which they entail; thus it can be seen that they are not divisible according to the dicursive/non-discursive opposition suggested in The Archaeology of Knowledge.

Foucault's genealogical investigations thus enable us to clarify the approach to history entailed in the archaeologies, and the conception of strategy deployed within them. However genealogical investigations are historical investigation undertaken from a very different perspective from the archaeologies - the perspective of power.[20] Achaeologies are histories constructed from the perspective of truth. They seek to establish the historical conditions for, and consequences of, the formation of certain 'regimes of truth'. But genealogies are not histories of truth but of power. They are histories of techniques of domination - the exercise of power over individuals in order to turn them into subjects at once governed - in the sense of channelled and directed, having their actions organised and directed in certain ways - and subjected - in the sense of a body and will no longer their own. Indeed, these analyses are not of power, but in terms of power. They use the issue of power as a grid of intelligibility, as a way of displaying the effects of domination

which inhere in the details of the relations and techniques in which individuals are caught up. Power is not a property directed 'from above' - it inheres in the microstructures of the relations of bodies, spaces, gazes and actions.

It is through a consideration of this analytic of power that we may see how genealogies differ from archaeologies. For they propose that investigation from the point of view of the present and the perspective of power reveal together something over and above, or rather across and between, the fragmentations and dispersions which are opened up for inspection. History can be analysed as the repetitive play of dominations and the struggle of resistances against them. In his discussion of Nietszche, which is also the occasion for his most explicit methodological reflection on the nature of genealogy, Foucault writes that Nietszche's history is not so much for knowing as for cutting. History, that is to say, has more in common with medicine than philosophy, for the task of effective history is to become a curative science. History undertaken from the perspective of power constructs the history of our present as a history of dominations, and thus produces a way of conceiving that history in which the truths that are purveyed may become instruments within struggles against such dominations.[21] This perspectivism is not merely a means of historical intelligibility, it is what gives to geneaology its critical function. This critical function is thus dependent upon the construction of historical forms as forms of domination, which in turn relies upon a conception of all power effects as also effects of domination. In what follows, I wish to consider only the consequences of this approach for the analysis of the formation and functioning of theoretical discourses.

The shift to power has clearly been attractive to many, for it

appears to reinstate the political radicality of critique which archaeology deliberately eschewed. But in respect to the analysis of discursive practices, it represents a retreat rather than an advance from the propositions of the earlier work. Let us examine a single example: the considerations concerning the emergence and functioning of psychology which appear in Discipline and Punish.[22] Psychology, in this account, is a knowledge of the modern 'soul', a knowledge which functions within a certain type of power termed 'disciplinary' power or simply discipline. In Foucault's conception of power, to term discipline a type of power is to say that it comprises a particular range of techniques, modalities, relations between elements and forces of a number of different sorts - bodies, spaces, gazes, architectural arrangements, the organisation of institutions, instructional techniques, the construction of timetables and so forth. These have the objective of domination, of a particular mode of subjection and subjectification of human individuals.

Discipline is a type of power that centres upon the maximisation of the forces of the body, having as its objective the parallel increase of its utility and its docility. What is characteristic about discipline in particular is that it works on the body through a range of small and detailed techniques, and that these do not operate directly, as it were - forcing the body, marking it, breaking it to the will of another - but indirectly, through the soul. The soul (a psychic or moral space, which is rather loosly specified in Discipline and Punish) is thus seen as the target of a certain type of power, or a certain mode of domination of bodies, domination through instrumentalisation, turning the body into a socially useful, productive and amenable resource. This soul is also the indispensable 'reality reference' of a certain type of knowledge: psychology. Indispensable because a knowledge of the nature and

functioning of this domain is a necessary condition for the techniques which seek to affect, transform or mould it in particular ways. This genealogical analysis thus conceptualises psychology, and the other 'psy' knowledges, in terms of their functionality for a particular type of power - they provide the various strategies of discipline with the intelligibility and rationality which is a condition of their possibility.

The articulation of knowledge (particular theoretical discourses) and power (particular modalities of domination) is inscribed in the object around which they are both organised: each is a necessary condition for the other. Through such an interconnection of psy knowledge and disciplinary power the modern soul is born:[23]

> It would be wrong to say that the soul is an illusion, or an ideological effect. On the contrary, it exists, it has a reality, it is produced permanently around, on, within the body by the functioning of a power that is exercised on those punished - and, in a more general way, on those one supervises, trains and corrects, over madmen, children at home and at school, the colonised, over those who are stuck at a machine and supervised for the rest of their lives. This is the historical reality of this soul, which, unlike the soul represented by Christian theology, is not born in sin and subject to punishment, but is born rather out of methods of punishment, supervision and constraint. This real, non-corporeal soul is not a substance; it is the element in which are articulated the effects of a certain type of power and the reference of a certain type of knowledge, the machinery by which the power relations give rise to a possible corpus of knowledge, and knowledge extends and reinforces the effects of this power. On

this reality-reference, various concepts have been constructed and domains of analysis carved out: psyche, subjectivity, personality, consciousness, etc; on it have been built scientific techniques and discourses, and the moral claims of humanism. But let there be no misunderstanding: it is not that a real man, the object of knowledge, philosophical reflection or technical intervention, has been substituted for the soul, the illusion of the theologians. The man described for us, whom we are invited to free, is already in himself the effect of a subjection much more profound than himself. A 'soul' inhabits him and brings him to existence, which is itself a factor in the mastery that power exercises over the body. The soul is the effect and instrument of a political anatomy; the soul is the prison of the body.

It is this form of argument, and the concept of power-knowledge which it constructs, which is the central theoretical device utilised in genealogy for the analysis of the social and historical existence and functioning of theoretical discourses, in particular the empirical sciences of man. The emergence of man as an object of positive knowledge is in absolute complicity with the emergence of a type of power which targets man as an instrumentalisable resource. We must abandon a tradition which counterposes knowledge to power because:[24]

power and knowledge directly imply one another;... there is no power relation without the correlative constitution of a field of knowledge, nor any knowledge that does not presuppose and constitute at the same time power relations. These 'power-knowledge relations' are to be analysed, therefore, not on the basis of a subject of knowledge who is or is not free in

> relation to the power system, but, on the contrary, the subject who knows, the objects to be known and the modalities of knowledge must be regarded as so many effects of these fundamental implications of power-knowledge and their historical transformations. In short, it is not the activity of the subject of knowledge that produces a corpus of knowledge, useful or resistant to power, but power-knowledge, the processes and struggles that traverse it and of which it is made up, that determines the forms and possible domains of knowledge.

What are the consequences of conceiving of the forms and possible domains of knowledge as fundamentally implicated in regimes of power-knowledge and their historical transformations? With respect to the objectives of the present study, this may be regarded as a retreat from the radical implications of archaeology in two respects. Firstly, in the form of analysis to which this conception of a fundamental linkage between knowledge and power leads. Secondly, in the conceptualisation of the social functioning of knowledge in terms of domination.

When posed in its abstract form, the notion of power-knowledge might appear to imply no priority between its two elements. However in the specific analyses carried out under its rubric,in particular the analysis of the emergence of discipline in Discipline and Punish, it is clear that this even-handedness is not maintainable; when the emergence of knowledges is conceptualised from the perspective of power, the selection of elements for inclusion in the analysis is determined by that perspective. Thus there is a reduction from the range of considerations which archaeology proposes, to, on the one hand to something akin to the formation of objects and, on the other hand, to something akin to the formation of strategies. Objects for

psy discourses are those that are offered to them in the practices where the new modalities of disciplinary power operate and wherein the now authoritative institutions, in particular the psy agents - petty judges of the psyche - are beginning to establish themselves. Thus objects are considered only in so far as they are immediately implicated in power effects; hence it is not surprising that the conditions of possibility and rules of formation of psy knowledge suffer an analytical reduction to power.

A similar analytic reduction occurs in relation to the conception of strategy. Strategies in archaeology are forms of thematic unification in the texture of a regime of statements itself, which are linked in variable but describable ways to modes of social functioning. When genealogy links the conception of strategy into the perspective of power, strategies become specifiable only in so far as their objectives may be characterised in terms of power. Strategies, for genealogy, are individuated in terms of the power effects which they produce. They are ensembles of force relations, relations of power, whose objective is the realisation of some effect or set of effects of domination through a particular disposition of objects, bodies, spaces, temporality etc. To the extent that the conditions of formation and functioning of theoretical discourses are examined only in respect to their pertinence to such strategies, it is not surprising that these discourses appear to be subsumed within their strategic deployment. Again, in a circular movement of analysis, the perspective of power appears to confirm what was the presumption of its analysis, the ubiquity of the implication of forms of knowledge within modes of power conceived of in terms of techniques of domination.

There is a virtual absence within geneaology of any examination of the heterogeneity of the nature, form and implications of what

archaeology terms the rules of formation of concepts: the internal organisation of the regime of statements which make up a discourse, as discussed earlier in this chapter. The complex space of analysis of the social existence of discourses which archaeology opened up is rapidly flattened down again, reduced to the deployment of discourses in strategies of power. And the effects and modes of functioning of theoretical discourses are reduced to the conditions of their implementation in particular social and political strategies. This reduction is exacerbated by the way in which the notion of power is set up; it is to this second question that I now wish to turn.

In discussing archaeology, it was argued that archaeology concerned itself with the establishment of what might be termed regimes of truth. Now it can be argued that one might conceive of these regimes as entailing effects of power in at least two respects. Firstly in terms of the constraints that are placed upon the existence of statements, within any discursive formation, if they are to conform to the norms of truth established within that formation. Not anything can be said at any one time, and the very division between truth and falsity interdicts the inclusion of some statements 'within the true'. Secondly, in relation to what are termed 'authoritative institutions' in respect to the formation of objects, and to what are characterised as 'enunciative modalities', constraints are placed upon those who are able to pronounce certain judgments and effective statements. In addition, discursive practices, and the effects of truth which they constitute, produce a whole range of social effects, allowing the setting up of particular social practices, making possible the thinking of certain institutional forms, conditioning the establishment of techniques of social organisation and administration. The truth effects of

theoretical discourses are manifold and heterogeneous, including, of course, those arising in the same or other theoretical discourses - making possible the posing of new questions, the conducting of new experiments and so forth. Yet, within the conception of power-knowledge, one finds not only a reduction of all these truth effects to the term power - not in itself particularly helpful as a unification of a genuinely and interestingly diverse field - but also a reduction of power effects to the repetitive terms of domination.

We have seen how this is a crucial element of the critical edge with which geneaology seeks to equip itself, but again it is a critical edge imposed by fiat, and for which no grounds are given. It is difficult to see how the truth-effects of theoretical discourses in general, or the human sciences in particular, can be reducible to effects of domination, unless anything which is implicated in any form of social arrangements is thereby implicated in a strategy of domination. In this case the term becomes otiose and the apparent critical force of geneaology which depends upon it is illusory. The conditions and consequences of the human sciences over and beyond those envisaged in power-knowledge, the distinctive contribution they have made to the field of our social arrangements above and beyond effects of domination, are never examined. This is because the very way in which genealogy sets up its perspectivism prevents the relevant questions from being posed.

In short, genealogy represents a retreat from archaeology towards sociology, a retreat to an 'analytic' which has something in common with 'interpretation' and 'critique', in that it seeks to reveal beneath the apparent neutrality of theoretical discourses, their disreputable origins and unpalatable functions. Paradoxically, too, genealogy entails a retreat towards conceptions of discourses in general and the human sciences in particular - as 'ideologies' -

certainly shorn of many of the unacceptable epistemological underpinnings of these theories but occupying much the same place in political argument. Hence the popularity of geneaology, which can be absorbed into the canon without disruption.

It is for these reasons that the study which follows principally utilises the conceptual advances and analytic devices of archaeology rather than genealogy. These do not constitute an automatic programme in which texts are inserted at one end and archaeologies produced at the other. What archaeology provides is a number of conceptual tools which may be used in combination with equipment gathered from elsewhere in order to construct an account of what made the psychology of the individual possible. One may summarise the terms of analysis which the present study adopts as follows.

The study seeks to identify the conditions of possibility for the formation of the psychology of the individual as a particular way of thinking and acting in relation to human beings. How did it become possible to specify and act upon human beings in terms of a psychological conception of the variability and measurability of mental capacities? Starting from this question, the study seeks to trace out the diversity and heterogeneity of the events which gave birth to the psychology of the individual as a discursive practice. Following the terms of The Archaeology of Knowledge for the purposes of exposition, one can separate out four directions of analysis, which intersect and overlap within the actual investigaton. Firstly, through what events did the objects of such a discursive practice form - in which institutional sites and practices, upon what surfaces, did its problems emerge; which authoritative bodies specified these problems and according to what general divisions.

Secondly, how were these objects conceptualised - in terms of what systems of argument and explanation; what counted as evidence and what as proof; what were the theoretical conditions for the formulation of the truth claims of a scientific discourse in these terms. Thirdly, from what sites were the statements of the psychology of the individual enunciated, by whom and to whom were they applied; what were the criteria which had to be satisfied for those who were to pronounce such psychological statements; what relationships were established between psychologists and other agencies, and between psychologists and their subjects of investigation and reformation. And fourthly, in what strategies was the psychology of the individual embodied - towards what objectives did they tend and with what rationale; with what other claims and strategies did individual psychology dispute and what was the extent, and the social consequences, of the establishment of its claims to truth.

What claims to veracity does such an account itself make, and how is it to be evaluated? It would be paradoxical if this account were to seek to justify itself by reference to a domain of real historical events to which it simply 'corresponded'. Archaeological accounts are themselves means of <u>representing</u>, and as such may be subjected to an analysis in exactly the same terms as those which they propose for the discursive practices which they seek to describe. Nevertheless, four directions do suggest themselves for the evaluation of archaeologies. Firstly, within their own terms. With what success are the analytical protocols themselves utilised, and to what extent does the account avoid the theoretical pitfalls which archaeology identifies? Secondly, in relation to accounts provided within other approaches to similar problems. To what extent does the account provided bear out the promises of archaeology over

and above the methods of interpretation and critique which it opposes? Thirdly, in relation to the historical record itself. Do the texts and documents deployed in evidence allow the systematisation which is placed upon them, or do they, or others which might be brought forward and conceived as pertinent, resist their description in such terms? Fourthly, and perhaps most pertinently, in terms of their utility. What new ways are opened up by archaeologies for thinking about the problems they address; what new and unexpected relationships do they highlight; what unanticipated questions do they pose; what intelligibility do they confer upon our present?

NOTES TO CHAPTER TWO

1 Foucault, [1954] 1976; Foucault, [1976] 1979.

2 Forrester, 1980, p290.

3 A recent summary and discussion of much of this material in English is in Coward and Ellis, 1977.

4 Foucault, [1969] 1972.

5 Foucault, [1966] 1972.

6 Foucault, [1961] 1970, pp 386-387.

7 Foucault, 1970, pp 74-75.

8 Ibid, p313.

9 Ibid, p345.

10 For one example, see Lecourt, 1975, pp 187-213.

11 In Hirst and Woolley, 1982 (which contains a good synopsis of Madness and Civilisation) and in Gordon, 1979.

12 For example, Zilboorg, 1941; Kraeplin, [1917] 1962; Jones, 1972.

13 See for example, Doyal,1979, Navarro, 1978.

14 Cf Foucault, 1973, passim; Foucault, 1972; Foucault, 1979.

15 Page references are to the English translation, 1972.

16 These texts are discussed in Lecourt, 1975; Gaukroger,1976; Bhaskar, 1975. See especially Bachelard,1951; Canguilhem, 1968.

17 Foucault [1971] 1972; Foucault [1977] 1980.

18 Foucault, 1977b, pp 146-147. These remarks are in the context of a discussion of Nietzche, but can, I think, be taken as indicative of the objectives of Foucault's own genealogies.

19 Cf Minson, 1980.

20 The key texts are Foucault [1975] 1977b and Foucault [1976] 1979. See also Foucault, 1982.

21 Op cit, n18.

22 Foucault, 1977a.

23 Ibid, pp 29-30.

24 Ibid, pp 27-28.

CHAPTER THREE

THE MORAL SUBJECT OF PSYCHOLOGY

This chapter seeks to establish a point from which the specificity of the discourse and practice of individual psychology can be marked. It has three specific tasks. Firstly to consider certain of the characteristics of the subject which psychology constitutes as its theoretical object. Between the organism, which is biological - a complex of organs and physiological processes of body and brain - and the person, whose forms of conduct are the concern of morality and government, is interposed a psychological domain. Here is the origin of volition, speech and action, the locus of thought, the site of conscience and judgment. Psychology requires that this realm have its own systematicity and laws which differ from those of biology on the one hand and ethics on the other. We will discuss the emergence of this conception of the subject in relation to eighteenth century sensationalist philosophy. The sensationalism of Locke and Condillac precluded the development of a psychological conception of individual variation. Individual psychology required not merely the existence of such a psychological domain but its inherent variability, whilst sensationalism stressed the universality of the processes it discovered. But it nonetheless, as we shall see, provided essential philosophical conditions for the formation of a psychological conception of the subject.

Secondly, to outline the characteristics of the 'moral' domain as it was conceptualised at the beginning of the nineteenth century. This was a domain internal to the subject which organised conduct, within which pathologies arose and to which treatment could be directed. It was systematised first of all within conceptions of the

origin and treatment of madness associated with the work of Pinel in France and Tuke in England. But the notion of such a moral order was of more general significance in the debates over social problems and their solutions in nineteenth century England within which individual psychology began to take shape.

Thirdly, in relation to these two issues, to examine conceptions of idiocy and its treatment in the early nineteenth century. Sensationalist philosophy and moral treatment made possible a conception of idiocy as treatable, and the development of techniques for the socialisation of idiots. When individual psychology took shape around a problem of deficit of intellect, it was through a transformation of these conceptions of idiocy.

These three issues are exemplified in a particular event. This revolved around the discovery in France in 1799 of a 'wild boy' who became the focus of considerable popular and scientific debate.[1] The 'incident' of the Wild Boy of Aveyron may thus serve as a thread linking the questions of the subject of psychology, the notion of a 'moral' sphere of pathology and treatment, and of the nature and status of idiocy.

The sensationalist individual

> If it was proposed to resolve the following metaphysical problem vis 'to determine what would be the degree of understanding, and the nature of the ideas of a youth, who, deprived, from his infancy, of all education, should have lived entirely separated from individuals of his species'; I am strongly deceived or the solution of the problem would give to this individual an understanding connected only with a small number of his wants, and deprived, by his isolated condition, of all those simple and

> complex ideas which we receive from education, and which are combined in our minds in so many different ways, by means only of our knowledge of signs. Well! the moral picture of this youth would be the Savage of Aveyron, and the solution of the problem would give the measure and the cause of his intellectual state.
>
> J M Itard, 1801[2]

It is widely recognised that the sensationalist philosophies of the eighteenth century stressed the essentially common nature of the human mind, spirit and understanding, and attributed individual variations to differences in 'experience'. It is also usual to note a shift which occurred at the end of the eighteenth century from such a belief in universal reason and the unity of man to the study and documentation of individual differences.[3] This is frequently attributed to the rise of the Romantic movement, and the supplanting of enlightenment rationalism by organicism and historicism.[4] Michael Donnelly attributes greater weight to the criticism of sensationalism mounted by Cabanis and other physiological researchers, which systematised and generalised diverse 'observations' of differences amongst individuals.[5] Many of these observations were derived from medicine and from medical psychology. The new clinical medicine of the hospital systematised methods of examination, observation and record keeping. It thus allowed the emergence, on the one hand, of general norms of physiological functioning and, on the other hand, attention to individual cases which could be described in relation to such norms.[6] Donnelly accords a particular influence to the work of medical psychologists. Whilst early alienists had constructed typologies of the different types of madness, the rise of the asylum as a clinical site allowed the description and cataloguing of

variations which, coupled with the increasing prominence of madness in medical, psychological and philosophical discussions, "reflected back ultimately on the discussions of 'man' in philosophical discourse."[7] Developed further by phrenologists, physiologists and craniologists, this led to a break with notions of the universality of reason and the emergence of a notion of a variable constitution. We will propose a somewhat different account in the present study. But let us begin by examining in more detail the conception of the individual formed within the philosophy of sensationalism.

What is important for present purposes about the philosophical doctrines of eighteenth century sensationalism is that they provide conditions of possibility for the formation of the modern psychological enterprise through the elaboration of a particular doctrine of epistemology. As philosophy began to order itself around the problem of 'the theory of knowledge', to pose this question as one of the relation of representations to represented, and to conceive of this relation on the model of vision, occurring through the mediation of the senses, a surface formed upon which the psychological subject could begin to find a foothold.

This is because the subject was freed from everything about it that was non-empirical except that which could be referred to the body. For nothing pertinent to the question of knowledge - no ideas, values or beliefs - were inscribed in the nature of the subject of sensationalist epistemology. A double separation was established. On the one hand, a separation between two orders of the subject - the bodily (organs, juices, sensations, senses, wants) and the moral (ideas, beliefs, values, desires). On the other hand, a separation between this subject - the duplex of an ideal realm enclosed in a discrete bodily order, bounded by the skin pierced only by the senses - and its milieu - the domain of objects from which experiences

spring. .Thus if ideas, beliefs, values and desires existed at all, this could only come about through the insertion of the body, with its senses and capacities, into the world of things, by means of an empirical process which could therefore be the object of empirical investigation. This empirical experiencing subject is the minimum condition of psychological discourse, the object which it comes to claim for its own sector of reality and upon which it can carve out its zones and specialisms.

John Locke's Essay Concerning Human Understanding was a work of moral philosophy, an attempt to use the principles underlying Newton's revolutionary studies for the investigation of the human soul, or at least its most elevated faculty.[8] The consequences of the soul becoming a scientific object within the problem of knowledge were far reaching. The division between 'inner' and 'outer' space was installed at the very origin of a science of man. Thus the problem for Locke, broadly speaking, was as follows. All we have in inner space are representations, since the objects of our understanding are for ever external to us. How then can we be sure that our knowledge is certain, rather than mere opinion? The problem of the certainty of knowledge came to be posed in terms of the accuracy of representations to that which is represented.

It is well known that Locke opened the Essay by arguing against the proposition that the mind contains innate ideas. What is less clear is exactly what it is that is designated by the notion of idea itself. Locke defined it as "whatever is the object of the understanding when a man thinks".[9] Ian Hacking has pointed out that Locke, like Descartes, Port Royal, Condillac and others, had no theory of meaning in the modern sense. There is no problem of meaning; ideas are conceived of as objects of mental vision: "there

is a class of objects that mediates between the ego and the rest of the world. These objects are called ideas. Secondly we are aware of ideas through a faculty akin to sight... Thirdly... words signify ideas but signification is a relation of precedence-or-consequence of an almost causal sort."[10] For Locke, then, no ideas were innate - the objects which were the focus of mental vision were all constructed from the products of experience and sensation. Locke accepted, however that it was necessary to postulate an inner faculty of reflection, which perceived, remembered and combined the primary qualities which come into the mind through the senses into ideas, and which had therefore to be considered as acting in itself as an original source of knowledge.

Locke accorded language a secondary and instrumental role in the formation of knowledge, indexed by the order of exposition which he adopted in the Essay. The origin of ideas is discussed in the second book; the third book is entitled "Of Words". Words are arbitrary and nominalistic. They are secondary and derivative marks, invented by men, formalised by convention, having a purely technical function and exerting no independent effect upon ideas. They are worthy of consideration, however, in that certain areas - especially logic and the liberal sciences - perplex thought by introducing words of obscure, uncertain or indeterminate signification. Condillac described his 1746 Essai sur l'origine des connaissances humaines in a subtitle, as a supplement to Locke's Essay.[11] But in it he reversed the priority, epistemological and discursive, which Locke accorded to ideas over signs. He asserted the centrality of the process of signification of ideas, arguing that ideas are only remembered, reflected upon, combined into complex forms and operated with through the medium of signs. Thus the study of the ordering and combination of signs, of the nature of language in its development,

was central to any attempt to understand the method of operation of the mind. And conversely, a necessary condition for, and a sure path towards certain knowledge became the construction of a well made language. Analysis was the process by which the ideas which man had of the world as a result of his experience were ordered and reduced to the rational, logical forms which were the closest that man could ever get to the rational, logical truths which lay beyond the limits of human experience. The principles of such an analysis formed the method of methods, the science of sciences, which defined the regularities of Enlightenment scientific discourse and the principles of rationality which guided it.

Science sought, through the rigorous analysis of experience into its smallest parts, and the ordering and recombination of those parts according to the principles of reason and logic, and in a strict relation to the facts of experience which must never be gone beyond, to constitute a rational order of knowledge. This order had the form of the unknowable laws of the universe but could neither hope nor wish to compare with them. Scientific procedure consisted in the rational ordering of representations so that they might conform with the facts of experience. Sense data were to be analysed into their simplest elements, to each element was to be ascribed an unambiguous and distinctive sign, the signs were to be recombined and ordered into a hierarchy from simple to complex within a logical and rational structure. Thus the work of science was that of constructing a well made language.[12]

When, in the Origin, Condillac applied the method of analysis to knowledge itself, his objective could therefore be immediately pedagogic. Whilst the relations of epistemology and pedagogy are hardly unique to this discourse, the way in which these relations

were established is of great significance. For it was not simply that sensationalist epistemology had pedagogic implications but that a practical project was inscribed at the heart of epistemology itself. Human understanding was simultaneously to be the object of investigation and the target of reformation. What Michel Foucault notes of general grammar is true of sensationalist epistemology - a part of its very nature is to be prescriptive.[13] Questions of the formation and adequacy of knowledge could now be shifted from a philosophical to an empirical terrain. The subject of knowledge was an empirical individual, and the practice of enquiry was a judicious combination of observation, experimentation and attempts at individual reformation. The psychological conception of the individual begins to form when a philosophy of the subject casts itself in a mode which is amenable to observational elaboration, open to practical verification, and utilisable for individual transformation.

For sensationalism, man's means and possibilities of obtaining knowledge are confined to the limits of his senses. The epistemological subject was fabricated on the model of the empirical and corporeal existence of man. And conversely, empirical human beings could provide, through their systematic investigation, answers to philosophical questions concerning the nature of knowledge and demonstrations of the epistemological propositions of sensationalism. The consequence of such an alliance between philosophy and positive science is a continual oscillation between a certain model of knowledge and a certain philosophy of man. Paradoxically, philosophy, in seeking to resolve its metaphysical difficulties through an appeal to the empirical, merely succeeds in transferring its accumulated baggage of presuppositions concerning the nature of the human subject onto that very individual who is supposed to

relieve philosopy of them.

In this epistemology of sensation, it is vision that provides the model of the sensible.[14] Empirical questions concerning the knowledge of those deprived of vision, or those who lose their sight later to regain it, were amongst the first points of intersection of philosophy and experimentation. But the relativising of knowledge with regard to the human subject placed epistemology in a field which contained not only the senses but the passions, and gave the question of human wants a place of primacy in the origin of knowledge. We attend to objects, and order our ideas in relation to them, because we must satisfy our wants. On this relation between knowledge and wants a developmental epistemology can be constructed.

In outlining the objectives of the Origin, Condillac set out his wish to reduce whatever related to the human understanding to a single principle. In his Traite des sensations he achieved the promise of finally eliminating the residual dualism of Locke's ascription of certain key epistemological functions to faculties of the human mind.[15] Thus whilst Locke maintained in his Essay that there were two sources of ideas, sensation and reflection, in the Sensations sensation was the sole source, and even the so-called faculties of the soul were to be rigorously derived from the features of sensation without assuming any innate properties of the mind. Condillac's exposition proceeds through a metaphor which had conditions of formation in contemporary scientific practice and would react back upon such practice. He imagined a statue, complete with all the organic structures of the human body but initially deprived of all its sensory faculties. By examining the forms of knowledge, the ideas which the statue would develop if one sense after the other were successively awakened, he purported to derive all the features

of human knowledge from a single sufficient source - experience conceived as sensory impressions upon the body. From a consideration of a subject limited to the sense of smell alone, Condillac demonstrated that, even limited to a single mode, sensation could generate all the faculties of the soul - the faculties of attention (including remembering, comparing, judging, discerning, imagining, forming abstract ideas, ideas of number and duration and knowing general and particular truths - all modes of attention), the different modes of desire (expression of passions, loving, hating, willing, the capabilities of hope, fear and wonder) and contracting habits. Sensation could thus be demonstrated to contain all the faculties of the soul without presupposing any ideas or abilities innate within the subject save one - the biologically given and universal ability to distinguish between pleasure and pain. For the derivation of the faculties from the sensations occurred at the price of assuming that no sensation was indifferent in regard to the pleasure or pain which it produced in the mind.

The distinction between pleasure and pain, and the tendency of the subject to seek to repeat the former and avoid the latter, was the single principle to which Condillac believed he had reduced all the attributes of man: "the different degrees of pleasure and pain are the laws by which the germ of all we are is developed, and that they have produced all our faculties."[16] We can see here the site within which a whole utilitarian ethics was to be installed in the work of Helvetius and the Ideologues.

Condillac himself, however, remained upon the terrain of epistemology. The sensationalist reduction of the subject to the universals of the senses, the calculus of pleasure and pain, and experience, had to solve two related questions. Given that all that could be known of objects external to the soul were the sensations

which modified that soul, how was it that we developed ideas of external objects, and ascribed these modifications to them? Given that the soul was nothing more than the sum of its modifications, those remembered from the past and those experienced at the present, how did the idea of the body as the unified and distinct site of the subject emerge? Condillac argued that a subject limited to the senses of smell, hearing, taste and sight would not develop any conception of the existence of objects external to itself, that is to say it would have no self separate from that which it senses.[17] It would, however, even if limited to these senses, develop a sense of self, by virtue of its memory, and hence of the ability to mark a difference between present and past states. This was possible because subjects had the ability to take the totality of their present and past states as an object of reflection, and to make a judgment as to their coherence, when motivated by wants and according to the natural and universal calculus of pleasures and pains. And the subject's knowledge of itself as both separate from the external world and the unified subject of sensations, needs, wants, desires and passions was the condition for the attribution of the source of sensations to objects in that external world.[18]

Condillac recognised the insufficiency of this philosophical argument, which was premised on the assumption of the very unity between sensations, needs, wants and judgments which it purported to explain. He resolved this problem through the often repeated founding gesture of developmental epistemology. The empirical subject - the child, its needs, its passage through the world - was called in to resolve the philosophical problem. Thus Condillac asked, rhetorically, "How could a new born babe be occupied with its needs if it had no knowledge of its body, and if it could not as

easily acquire some ideas of bodies able to take care of it?"[19] The watchful eye and prior arrangement of nature and the body were accorded the ability to resolve the problem, that epistemological discourse has itself constructed, of the adequacy of knowledge to its object. Philosophy had begun to cede its epistemological rights to the space of positive science through the notion of the subject which it had constructed.

This then was the birth of a subject which a positive science of man could take as its object. There were no innate ideas or faculties, just a subject form which could support self-consciousness, awareness of others, simple and complex ideas, attention and acts of judgment, given only possession of the senses, natural wants, the ability to distinguish pleasure and pain and the possibility of experience. All ideas developed from sensations as directed by needs, wants and desires to produce experience. Simple experiences could be directly annexed to simple ideas; the more complex must be analysed, classified and combined through signs. Knowledge consisted in a regular, rational and systematic relation between signs and ideas. And epistemology was immediately a pedagogic activity, in that it recognised this as the condition of knowledge, sought to reform other sciences such that they too possessed such a structure, and to instruct others in the correct methods for gaining knowledge.

A philosophical surface had formed which made possible a positive science of the empirical human individual. This science began to form itself in the last decades of the eighteenth century around figures which to our eyes appear marginal and heterogeneous: those suffering from cataracts, deaf mutes, wild children. But for the eighteenth century these figures were unified in virtue of their philosophical significance. To be deprived of some sense organ, or

of some experiences, was not a mere accident or freak of nature, it was an event of considerable philosophical importance. For to found an epistemology exclusively upon the sensations was to accord, for the first time, a demonstrative function in philosophical discourse to those who, for some reason, were deprived of one or more of the full complement of the senses. It gave an even more important place, crucial in the resolution of philosophical conflicts, to those who, having been deprived of a particular faculty, were enabled to regain it by an act of man or God: the deaf who hear again, the blind given sight. Thus Diderot wrote studies of the deaf and dumb, and of the blind.[20] The expository device of the statue whose senses progressively unfold which was at the centre of Condillac's Sensations, was clearly inspired by the development of new techniques to restore sight to those without it, and the observations made upon their experiences of a newly visible world.[21] The empirical subject and its vicissitudes provided the means of demonstration and elucidation of the epistemology of sensationalism, but simultaneously a new importance was conferred upon these events and experiments themselves.[22]

It is thus possible to understand how a small child, apparently first brought into contact with human society in the Department of Aveyron in 1800, at the age of about twelve years, to all appearances deaf, mute and a savage, without the manners and habits appropriate to children of his age, could become the focus of learned and popular discussion throughout France. How this small child could attract the attention of the leading scientists of that revolutionary period - Bonnaterre, Virey, Sicard, Pinel - and become the subject of a state financed experiment lasting some six years. And how this could secure the fame of its principal actors - Victor the Wild Boy and

Jean-Marc Itard his governor, teacher and doctor - until the present day. It is this philosophical configuration which made it possible for every facet of this unfortunate little boy's existence - his tastes in food, his cries and the expressions of his face, his happiness and sadness, his pleasures and pains, his sexual difficulties - to become the object of a massive apparatus of texts, of academic disputes and technological innovation.[23] Victor, that is to say, has a good claim to the status of the first psychological subject.

The Wild Boy of Aveyron entered the domain of philosophy not on the grounds of his lack of senses but on the grounds of his lack of experience and all that flows from it. Defects in experience had become a philosophical problem. And the epistemo-pedagogy of sensationalism made of the Wild Boy the simultaneous object of a knowledge and target of a therapeutic practice of reformation and normalisation. A link was beginning to be systematised, certainly not without precedent but now organised, generalised and provided with a methodological rationale, between the formulation of true propositions about subjects, their systematic observation, experimental manipulation and therapeutic socialisation. And these latter mundane operations thus acquired a scientific status because of their philosophical significance. At the same time philosophy had, in a move that would prove irreversible, abrogated the requirement that it internalise all its means of demonstration and proof. An alliance had been struck between a mode of argumentation that remained speculative and a mode of investigation which purported to be empirical - an alliance which governs psychological discourse on cognitive processes even until today.

In relation to the Wild Boy of Aveyron, Lucien Malson writes, "A hundred and thirty years before the Kelloggs, Itard was already

talking like a modern psychologist".[24] And Harlan Lane's comprehensive recent study sees, in the work of Itard, the example of a great and original mind which, working within the diverse strands of thought which constituted the spirit of Enlightenment science and humanism, found in Victor the occasion to synthesise and transcend them, and to originate a whole range of theories and techniques which anticipated and helped to bring into existence much of modern scientific psychology and pedagogy:[25]

> Itard had set out to train an enfant sauvage; by his journey's end he had become the originator of instructional devices, the inventor of behaviour modification, the first speech and hearing specialist, founder of otolaryngology, creator of oral education for the deaf and father of special education for the mentally and physically handicapped.

We should be critical of the familiar play of originality and continuity which inform these accounts of Itard's encounter with his enfant sauvage. But we should recognise that this incident of the Wild Boy of Aveyron illustrates a further fundamental feature of the modern psychological enterprise. Subjects defective in sensory abilities or in experience gained their pertinence from the answers they could provide, the test they represented, the demonstration they allowed, for the theses of sensationalist philosophy. But Itard is implicated also in a crucial reversal of the direction of incidence of theoretical discourse and empirical subject.[26] The question here became not simply what Victor could do for science, but what science could do for Victor.

We have already remarked upon the pedagogic thrust of sensationalist epistemology. Central to the medical psychology and scientific pedagogy of the early nineteenth century was this linkage

between the theoretical and the practical, the simultaneous constitution of an object to be known and a target to be transformed. Theory and practice combined in a sort of phenomenotechnics of the subject, a process in which the abstract object of a theory of the subject was concretised, in which theory was materialised.[27] Psychological theory was, from the moment of its inception, always a theory 'in action', and the 'theory of the subject' always operated in and through a set of technical and practical procedures for its 'realisation'. A positive science of man produces its object within a set of practices in which it is to be known through its transformation. Hence the founding moments of psychology always concern the pathological, as that which is to be normalised and known through the procedures and results of reformatory tactics. Itard's treatment of Victor was the reproduction in microcosm of the major institutional sites within which such a science of man would be elaborated - the asylum, the prison and the school were only the first of these. Let us turn to examine this question in relation to the procedures of moral management which were deployed in the early nineteenth century for the reformation of the mad.

The moral space

> Indeed, when we consider the little time he has been in society, the Savage of Aveyron is much less like a simple youth, than an infant of ten or twelve months old, and an infant who should have against him anti-social habits, an obstinate inattention, organs scarcely flexible, and a very blunted sensibility. In this last point of view his situation became a case purely medical; and the treatment of it belonged to moral medicine - to that sublime art created by the Willis's and the Crichton's of England, and lately introduced into France by the success and

writings of Professor Pinel.

J M Itard, 1801[28]

For the eighteenth century, conduct, in the case of madness at any rate, existed in very close proximity to the ducts of the body and their contents - the nerve fibres, the blood, the bowels, the humours. The contacts between medicine and madness (initially limited to those with money to pay, and occuring within the family or in one of a small number of private establishments for the deranged of the wealthier classes) had the objective of the restoration of these bodily fluids to their proper states. Thus, for example, a range of noxious substances were administered in an attempt to strengthen the spirits or fibres which had been weakened in madness. And techniques of purification - blood transfusions, bleedings, purges - were utilised, linked to a theory of madness involving the clogging of the fibres of the mind or viscera. A third set of treatments involved the use of immersions - hot or cold baths, showers or douches - with the aim of restoring suppleness to the fibres and the added advantage of cooling or shock to bring sufferers to their senses. Fourthly, the movements of the body could be regulated - through the use of restraints or of specialised pieces of apparatus for spinning or revolving the lunatic - partially with the aim of adjusting the movements of the bodily fluids, partly in an attempt to restore the links between the deranged internal time of the body and the real external time of the world.

It was, paradoxically, the very intractability of madness to these physical cures, and the conclusions that were drawn from this that madness was beyond cure, which provided the conditions under which, towards the end of the eighteenth century, a space could begin to open between the fibres and the ravings, delusions, hallucinations

and melancholias of the mad. This space would be designated moral. Let me outline the steps which were involved.

One can start with Battie. Having argued that there is no cure for original madness - though the physician may treat consequential madness with some success - Battie concluded that the chief function of the physician was that of 'management' - general care of the patient, confinement away from friends or families, the checking of unruly appetites and the pursuit of a quiet, well ordered life.[30] Pargeter's Observations on Maniacal Disorders (1792) reversed this connection between madness and a well ordered life: whilst we cannot search for the real causes of insanity, one thing we can conclude is the part played by immoderate passions in its genesis - sudden emotions, luxury, the reversal of the proper functions of day and night, fanaticism - indeed a range of conditions arising not so much from the fibres as from the morals. And while the physician should apply the full armoury of physical treatments - bleeding, cupping, cathartics, emetics, cold and hot bathing, drugs - since of the ultimate causes of these disorders we must remain ignorant "chief reliance in the care of insanity must be rather in management than on medicine". Further, since the maniacal disorders originated with moral excess, they could be governed and subdued by moral domination. The physician was to become an expert in the art of governing maniacs through the exercise of moral mastery.[31] This was how Pinel described the method of Reverend Doctor Francis Willis:[32]

> His face, usually friendly and affable, changes completely its character the moment he catches sight of one of his patients. It undergoes a metamorphosis instantaneously and commands the attention and respect of the madman. Penetrating eyes seem to read his heart and to divine his thoughts as soon as they come into being. Over them he exercises something resembling

> sovereign authority, which subsequently becomes a therapeutic instrument and which in no way contravenes the employment of gentler instruments.

The development of moral treatment is habitually identified with Tuke's foundation of the York Retreat in 1792, and Pinel striking the chains from the insane in Bicetre in 1793.[33] It was not accidental that the methods involved in this 'act of liberation' were developed by clergymen-doctors like Pargeter and Willis. For the relations of patient to doctor established within moral treatment were reminiscent of that of sinner to priest.[34] One strong, pure, knowledgable, authorised to excise the undesirable in thought and behaviour by means of the power and prestige attached to his standing as much as by the specialised techniques he employed; the other weak, sly, having transgressed and wishing only to avoid responsibility for such transgression; the enforced contact, the patient interpellated as one who was sick and was known to be sick by another stronger, wiser and more powerful. Thus was the madman bent to the will of the doctor, whose will was only to make the madman accept that he was mad and in doing so regain the possibility of judgment and control. If restraint and coercion were utilised, it was only to enable this end to be carried out, if the well being of the mad was promoted it was only to provide the conditions under which this reformation of morals could become possible.

Note the space in which this domination occurred. It was not an act of force, of repression, of the threat of violence ensuring submission. It was a case of will operating upon will, of a contestation in a moral space, in which the madman enslaved himself to his master as if of his own desire. A will which, in being mastered, accepted the mastery as its own will. Dependence,

domination, transformation - these were three of the central terms of the operation of moral treatment.

Moral treatment thus defined itself through oppositions along a number of axes. It opposed physical with moral causes of insanity - passions, vices, lusts, griefs and desires rather than humours, spirits, fibres, lesions in the brain. It constructed moral classifications and characterisations of insanity, as opposed to physical nosologies. And it deployed moral rather than physical treatments of insanity - the management of the moral life, relations and milieu of the madman rather than his purging, bleeding, bathing or rotation.

The treatment required the creation, around the patient, of a domain of pure morality. Hence the asylum became the right place, and the family became the wrong place, for curing insanity. Firstly, of course, because the institution provided the appropriate conditions for the realisation of the dominance/dependence relation which successful treatment required. But secondly because treatment depended upon the possibility of manipulating the experiences, plesures, pains, movements and timetable of the insane. The family environment was unsuitable not only because within it the mad were constantly reminded of their past, of the exciting causes of their indisposition, but also because the family milieu was inherently unprogrammable. The new asylum was to become a moral domain, but not one that sought to activate the principles of morality associated with religion - love, piety, brotherhood, asceticism - but rather one which deployed a set of moral principles purely social in origin and orientation. "Formerly the locus of confinement had inherited, in the social sphere, the almost absolute limits of the lazar house; it was a foreign country. Now the asylum must represent the great

continuity of social morality. The values of family and work, all the acknowledged virtues, now reign in the asylum."[35] All those moral principles whose violation had now achieved the status of cause in insanity were to be restored in the ethical uniformity of the asylum. Drunkenness, promiscuity, laziness, apathy, misconduct of any sort were to find their antidote in the extension to the inmates of the homogeneous and unbroken rule of morality.

But how was this rule of morality to prevail over the deranged, the melancholic, the manic, the perverse? It could do this for two principal reasons. Firstly, because insofar as the mad, for all their moral transgressions, remained human, there existed within them some core to which treatment could direct itself. It was the lack of this possibility which made idiots, for Pinel and Esquirol, impervious to the action of moral treatment. But lodged deep in the interior of the mad lay an essential nature, a primitive morality which was both the conditon of treatment and that which manifested itself during such treatment. Secondly, this core was accessible to a therapeutics because it was organised by principles which governed any sentient organism - the pursuit of pleasure, the avoidance of pain, the ability to form associations. Thus the moral order could be constructed, shaped, organised and re-educated through disciplining the body, imposing habits and regularities through the tactical utilisation of this utilitarian calculus.

Hence the asylum was not merely a domain of morality, but a domain of the enforcement of morality, by virtue of the principle of punishment for transgression and reward for obedience. Thus Reil wrote "Rewards that bring pleasure and punishments that bring displeasure should be meeted out in a proportion caculated to lead patients back to the path which is necessary and proper for them and which will cause them to be submissive and to practise strict

obedience."[36] Punishment was not given in anger, or as the appropriate means for the subduing of those who partake in the nature of the beast. It was given coolly, dispassionately, according to a pedagogic calculus that sought to form and shape conduct in morally desirable directions. All aspects of the asylum were informed by such a calculus and organised around the constant evaluation of the behaviour of the insane individual. The giving or withholding of anything which the inmate might require, or any object that might be desired, could be integrated within this calculus - isolation, hunger, thirst, defamation, humiliation, chastisement - but, in addition, moral treatment created the conditions where the old medical treatments could be reactivated, outside their original therapeutic rationale, as threats or punishments for transgression. Esquirol found that the threat of sending the insane to the incurable ward soothed them like magic.[37] But also the douche was an admirable instrument for curbing rage, breaking a dangerous resolution or forcing a patient to obey. And similarly Pinel believed, of the shower, that "considered as a means of repression, it often suffices to subject to the general law of manual labour a madman who is susceptible to it, in order to conquer an obstinate refusal to take nourishment, and to subjugate insane persons carried away by a sort of turbulent and unreasoned humour".[38] The asylum, with its continual surveillance, was certainly a moral regime, but it was a juridicalised morality. It was a morality in which the law transgressed was only secondly the law of God, but firstly the law of the social space of the asylum, the assemblage of norms which the mad had to make their own if they were to return to normality. Thus Sonnenstein made no bones about it; if the desired results were to be obtained, "Punishment ought to be meeted out as speedily as possible

following the offence."[39]

Hence the necessity of continuous monitoring of moral rules, of continuous assessment of behaviour in relation to transgression. The violation of a norm became an offence; hence the institution of a frankly juridical regime. The inmate had to be aware that all behaviour was judged according to a rule, and that the transgression of any rule would be known and punished. But the function of this surveillance and judgment was not the simple one of the production of a well ordered institutional regime, as it would become later in the nineteenth century. On the contrary, the conduct of the asylum, all those harsh words and unsympathetic responses which we have just been documenting, had a specific therapeutic rationale. This continual play of judgment had the objective of forcing the inmate to take into himself the role of judge, to internalise that moral order which constituted the asylum, to incorporate the rules and principles of that institutional space of morals into the moral space of his own character. Michel Foucault comments that:[40]

> Everything was organised so that the madman would recognise himself in the world of judgment that enveloped him from all sides; he must know that he is watched, judged and condemned; from transgression to punishment, the connection must be evident as a guilt recognised by all... This almost arithmetic obviousness of punishment, repeated as often as necessary, the recognition of transgression by its repression - all this must end in the internalisation of the judicial instance, and the birth of remorse in the inmate's mind: it is only at this point that the judges agree to stop the punishment, certain that it will continue indefinitely in the inmate's conscience.

The moral space of the asylum reduplicated, in material form, the

contours of the domain that had begun to form between the body and its conducts - the formation of this moral space of the soul was thus the condition, referent, target and product of the regime of moral treatment. This particular domain, at once mental, medical and ethical, made possible more than just the reformation of the insane. Indeed, despite the rapid building of asylums during the nineteenth century, moral treatment in its original form lasted but a few decades. It gave way before the massive overloading and underfinancing of the asylums, and a critique of the therapeutic disappointments of moral management. But the conceptual counterpart of this institutional site - a particular way of constructing objects for investigation and an explanatory structure consisting in a specific way of conceptualising those objects - was destined to play a fundamental role in the social and political debates of the nineteenth century, and in the formation of individual psychology. Let me rapidly outline some of the contours of this space as it took shape in England and in France in the decades bridging the eighteenth and nineteenth centuries.

It was first of all a space of <u>character</u>: in it the ethical conditions and consequences of past habits, present conduct and future behaviour intersected. The moral domain became the place of organisation and integration of the passions, the will and the understanding. It formed a matrix for the operation of desires, ideas, signs and actions; a domain where what was felt could affect and could be affected by what was done; where what was said could have consequences for what was learned; where what was desired could relate to what was understood. It was the place which both conditioned what was experienced and was conditioned by such experiences. Here the passions and the will found their proximate

source; here experiences had their effects and such vices as intemperance, immoderation, over indulgence and the like, took their toll. The moral space remained a space of morality in the restricted sense of rules and principles governing right conduct, but the field of incidence and form of organisation of moral questions was radically transformed by the links forged with medicine, with a science of the understanding, and with the exigencies of personal biography.

Yet for all its complexity, the moral space remained two-dimensional, a space without hidden depths or secret laws. It was certainly structured historically - things past were laid down and affected things present and future - but it had no thickness to it. In it things remained exactly what they seemed and what they were. Excess was thus not the sign of something hidden, deeper, but only of itself - a tendency to excess - or something exterior to the moral space - the physical make-up of the body, the nerves, blood, colon or urine.

The inventories of the causes of insanity produced at the turn of the eighteenth and nineteenth century form a strange amalgam to our eyes: excesses of joy, grief, fright, fear, anger or love; religious fanaticism; intemperance; immoderation in food; gambling; vices of all sorts; onanism; shock; disappointment or sudden success in personal or business affairs; rapid changes of fortune; extremes of heat or cold; excessive vanity or ambition; failures of management in the nursey, especially early indulgences; fever; blows to the head; - the possibilities proliferated.[41] But to the early nineteenth century, the intermixing of the physical, the emotional, the physiological, the financial, the intellectual, the accidental, the unethical and the vicious formed a rational distribution. The conception of a moral domain had allowed the systematisation of

elements which were prviously evaluated in distinct spheres into a single register of evidence for, and promoters of, insanity.

There was a moral space responsible for the organisation and determination of the actions of the subject. It consisted in a nexus of relations betwen predispositions, experiences and conduct, between desires, understandings and actions. The notion of character described this space. It integrated the flows of the body, the effects of passion and vice, the excesses of will and the exigencies of fortune within a moral matrix. Here the forces of the body were mustered and directed, channelled towards particular objects, good or ill, vicious or virtuous. And here these forces could be neutralised or blocked, or, on the other hand, amplified and intensified. In the nineteenth century this moral space, with its medicalisation of the conditions and consequences of conduct, played a crucial role within a complex discourse of police and social economy; it provided a particular way of forming and conceptualising social questions, and established the place where a theory of degeneration, already glimpsable here, would form itself.

The educability of idiots

> It has been noted that the so-called Wild Boy of Aveyron has several characteristic traits in common with many children whose sensory functions or intellectual faculties are more or less impaired and who are condemned to vegetate sadly in our asylums, since they are not susceptible to any training... Some of the children in our asylums reduced to a state of idiocy are inferior in intellectual faculties to the child of Aveyron; others are his equal or even superior to him... Do these facts not assert that the child ought to be categorised among the

children suffering from idiocy and insanity, and that there is no hope whatsoever of obtaining some measure of success through systematic and continued instruction?

P Pinel, 1800[42]

The problem of classification which oriented the natural history of medicine of the eighteenth century was interwoven with the theory of language and of knowledge which we have already examined. To decompose the language of everyday life, and to recompose it through the mechanisms of analysis was not merely to provide a regular and orderly classificatory table but to establish a valid set of relations amongst classes and sub-classes of words, and hence both amongst the complex ideas which they annexed and amongst the real objects to which they referred. To place a particular phenomenon in a specific class was not merely to systematise it, but to establish a certain knowledge of it. The construction of a classification was thus an activity which was at once epistemological and philosophical. It could also be, as we shall see, an activity which was practical and therapeutic.

The systems of classification of illness which were proposed at the end of the eighteenth century were dependent upon the emergence of a medicine of the clinic, which had the case as its object. As Michel Foucault has demonstrated, the formation of the clinic as a mode of medical knowledge and a site of medical practice was made possible by a complex of political, social, technical and theoretical shifts which took place at the end of the eighteenth and the beginning of the nineteenth centuries. Amongst these were the emergence of the hospital as the principal site for the practice of medicine, as a result of increasing urbanisation and industrialisation coupled with a change in the laws of assistance

which made institutionalisation a condition of medical treatment for those on relief. This was linked to a change in relations between doctors and patients, so that doctors were now able to observe a whole series of instances of a particular condition. This made possible the tabulation and statisticalisation of diseases and the development of classifications and diagnoses based on the links between symptoms and prognoses, between symptoms and individuals and between successive events in any one condition. Simultaneously there was a change in the methods of transmitting medical knowledge, whereby the hospital became a pedagogic apparatus in which the poor, benefiting from the care they received for free, compensated through the medical lesson which they provided. These shifts made possible the clinical conception of the <u>case</u> - the unique intersection between a body and a life history, as the proper object for medical knowledge and for the practice of the cure.[43]

We can note in passing that clinical medicine was an individualising theory and practice. The case was unique, but intelligible. Its individuality could be charted in relation to its deviation from the general standards of functioning which could now be constructed. The case was the locus of knowledge and of treatment. It s status was quite different from that of the individual in the old medicine where the doctor treated his patients in their own homes, and as friends. There, the common nature of diseases and the particular nature of individuals existed on different registers. When, in clinical medicine, disease became a process of life, the essential normativity and variability of life processes brought the individual within the scope of knowledge in a way which ontological conceptions of disease entities had precluded.[44]

Thus, as Donnelly notes, the observations produced by clinical medicine began to be deployed in questioning whether human individuals were all equivalent prior to differences contributed by environment and education. The article on equality in the Dictionnaire Philosophique had proclaimed that all men enjoying their natural faculties were equal. Idiots, blind, the deaf and the grossly deformed represented only boundary cases which defined the limits of humanity.[45] But Cabanis, utilising clinical evidence, disputed this claim, arguing that there was no communality of all types of humanity, but that individuals varied in their nature and capacity to feel.[46] And it was to the results of moral medicine that Itard referred when he criticised education for being:[47]

> never adapted to the innumerable variations in the intellectual make-up of individuals. Let us take one hundred children of the same age and subject their intellectual state to an analytical examination. We will become convinced that there are as many points of dissimilarity as of similarity among them... psychological man more than physical man has his idiosyncracies or individual differences.

It would be many decades before a psychology of individual differences would be constituted, and the emergence of the possibility of precisely such a clinical approach was, as we shall see in a subsequent chapter, to play a vital role in its formation. As, too, did the question which Itard was discussing in this very passage - that of "idiots... or... those individuals whom we generally call slow witted; further... those who are noticeable in our society for their lack of imagination, their faulty judgment, their lack of purpose or their highly circumscribed ideas."[48]

Pinel's Nosographie Philosophique was published in three volumes in 1798.[49] Mental illness was divided into four classes;

mania, melancholia, dementia and idiocy. There was nothing original about this division, or the place of idiocy within it. Idiocy was set apart from the other forms; it was afforded a less extensive symptomatology and aetiology, but was marked by an absence of intellectual faculties, almost certainly with an organic basis, almost invariably incurable. Indeed, whilst the Traite medico-philosophique sur l'alienation mentale reported 51% of cures in cases of mania, 62% in melancholia, 19% in dementia, it found none at all in cases of idiocy.[50] Thus for Pinel, whilst idiocy could pose interesting legal problems, it remained marginal to a mental medicine which centred around a therapeutic practice and depended upon the existence of a core of reason and humanity which remained within the insane. When the Wild Boy of Aveyron was brought to Paris, the Society of Observers of Man appointed a commission to study him and to report its observations: Pinel; Sicard, the Director of the Institute for Deaf Mutes; Jauffret, naturalist; de Gerando, philosopher of language and ideology; Cuvier, anatomist. At the end of December 1800, Pinel's report documented the imperfections of the senses and their dissonance, the absence of speech, the fleeting character of his ideas, the limits of his feelings. On the basis of comparison with others who had been placed in various positions in the range covered by the class of idiocy, Pinel drew the necessary conclusion: the Wild Boy was properly to be classified among the idiots, ineducable and incurable. It was as a member of this class that the child was entrusted to the Institute for Deaf Mutes. The chief physician, who was appointed just two days after Pinel's report was delivered, was Jean-Marc Gaspard Itard.[51]

Deaf mutes in eighteenth century France were not merely objects of philosophical interest, they were also the focus of a

philanthropic pedagogy. The Abbe de l'Epee, who founded the Institute for Deaf Mutes, had recognised the revolutionary implications for the deaf of the relationship which sensationalist epistemology proposed between ideas and the signs by which they were marked. If articulate sounds were adopted by man in the beginning simply because of the ease and variety with which they might serve to mark ideas, there was no reason why this mythical origin of language should not be replayed for those who by virtue of physical accident, lacked the means to utilise spoken language and oral signs. Thus they too might be provided with the means to mark, recall and order their ideas. The deaf and dumb, hitherto conceived of as irremediably ignorant, were so only because of their absence of a spoken language for communication and for the organisation of their own understanding. To teach them a language then would be pedagogic in both a restricted and an expanded sense - not simply through the immediate activity, but also through the prescriptive and analytic benefits which the learning of a language conferred.

Epee had regarded gesture as the natural language of the deaf, a language of signs to which they were led directly by the intersection of nature and their wants. This natural language of gesture could be developed and conventionalised, transforming it from the immediate expression of physical needs through to signs designating objects and grammatical relations. Epee produced a conventionalised language of gesture by translating the structure of French language and grammar into signs, both gestural and written. And in his institution in Paris, he taught his pupils to communicate in gesture signs, and to translate these signs into established written words by committing the association between word and sign to memory.[52]

Sicard was no less committed to sensationalist philosophy and

the methods of analysis which it proposed. But he disagreed with the techniques which Epee had utilised. Epee, he argued, had produced only copyists - the deaf mutes could translate written French into signs and vice versa, but they could not compose for themselves even simple sentences of French, nor carry out the instructions in a letter which they could translate into signs. Epee had recognised this, and considered it the inescapable limit to pedagogy for the deaf mutes. But Sicard considered that it arose from a technical and methodological error. This was the teaching of invented signs corresponded to each word, rather than the elucidation of signs from the pupils which corresponded to particular ideas.[53]

It was for these reasons that Sicard transformed his pedagogy into a practice which was more clinical than educational. He individualised his pedagogic techniques, directing them towards the particular propensities of specific individuals, adjusting them in the light of their particular requirements and orienting them in the light of a definite doctrine of the subject. The target of these practices was the soul, and the nature of that soul, the rules of the moral space, determined the techniques and their means of application.

It was these techniques, refined and developed in relation to the doctrines of moral treatment, which Itard utilised in his work with the Wild Boy of Aveyron. And less than six months after Pinel's pessimistic conclusions, the Society of Observers of Man, at the initiative of Sicard, invited Itard to submit a further report on the Savage Child, and concluded after hearing it, "These observations made by Citizen Itard, who has tried to conduct the education of this child, lead us to conclude that his faculties have been developed up to a certain point, and hope that more substantial development will

be seen subsequently. The assembly applauds this effort."[54]

But neither for Itard nor for the assembly had the traditional view of idiots as incurable and ineducable been transformed. It was by disputing Pinel's diagnosis of the wild boy as an idiot that Itard was able to develop his system of treatment, utilising Sicard's methods of individualised instruction within a regime modelled on moral treatment, which sought to reawaken, develop, instrumentalise and channel Victor's wants. Thus it is not surprising that Esquirol could still write, in 1818, after the results and limits of Itard's attempts at methodical education were well known:[55]

> Everything about the idiot betrays a organisation imperfect, or arrested in progress of development. We can conceive of no possibility of changing this state. Nothing teaches us how to impart, for a few moments even, to the wretched idiot, an increase of reason or intelligence ... It will be observed, that I have nothing to say, respecting the treatment of a constitutional condition.

Yet the incident of the Wild Boy of Aveyron, and Itard's treatment, had provided the conditions for a transformation in the place and status of the idiot in philanthropic and pedagogic practice.

In 1839 Edouard Seguin opened the first school for idiots.[56] Inspired by the philanthropic socialism of Saint-Simon, he sought a class of unfortunates to whom he could extend its benefits. He discovered idiots intermingled, without aid or hope, with convicts, epileptics and the insane. Moral treatment of the Wild Boy had only been possible for Itard on the condition that the boy was <u>not</u> an idiot. But for Seguin, Victor <u>was</u> indeed an idiot; his progress under the regime of medico-pedagogy demonstrated that, given appropriate methods, idiots could be educated; they had become

improvable, a new target for philanthropy. Seguin, it should be noted, did not dispute Esquirol's belief that idiocy was incurable. What he contested was the view that was still maintained as late as 1837 in the standard Dictionaire de Medicine: "It is useless to combat idiocy. In order to establish intellectual activity, it would be necessary to change the conformation of organs which are beyond the reach of all modification."[57] Idiots remained incurable for Seguin, but despite this they were not ineducable.

Education for the idiot had a moral function, a philosophical basis and a physiological method. The idiot was one isolated from humanity by virtue of cerebral incapacity, deprivation of stimuli to the senses or by some combination of mental and physical defect. The physiological method was a sequence to reopen the linkages between the idiot and the physical, emotional and moral world which surrounded him:[58]

> From the feeling of pressure in the tactile organs which taught prehension to our feeling of duty towards our pupils which taught them affection, from the distinction of the difference between a circle and a square and that between right and wrong we have followed a continuous path, beginning where the functions refuse to soar higher in the atmosphere of idealism.

Seguin's physiological method entailed the systematic exercise of the senses and the organs in a programme of instruction, general yet individualised, the training of the speed and extent of the cerebral functions, muscular functions, sensory functions, organs of thought, of movement and extension. Sensationalist philosophy had left the question of the training of the senses to nature, and had refused to differentiate between the faculties of the understanding in the child and the man. Senses were either present or absent, and

if they were present no organised pedagogy of the sensory abilities is required, for the natural interaction of wants with experiences was ample.

Seguin, following Itard, systematised some significant shifts in the sensationalist field. Where sensationalism found intellectual error, it located the blame not in the senses but in the field of signs; for Seguin the abilities and senses themselves were variable and could be educated, the body and its organs, the senses and the muscles, could be systematically awakened, taught to move and to discriminate. They could be mustered, organised, governed through a systematic programme of instruction. Secondly, variation was introduced into the intrinsic nature of the moral realm - it was not a case of a universal reason or intellect being present or absent but of variation of a psychological order which in interaction with experiences of certain types, in a certain sequence, produced results in the sense of both intellectual abilities and morality. And thirdly, the conditions were formed for a conception of distinct laws of childhood moral organisation. It was from the space of pathology, from the problem of idiocy, that the possibility of a knowledge of the normal child arose.

It was for Maria Montessori to effect this transformation in the field of pedagogy. Whilst others wondered that idiots, in the schools she established for their training, did so well at examinations in relation to normal children, she wondered why the normal children did so badly. But despite Montessori's own desire to trace her heritage back to Seguin and Itard, the transformation with which she is linked occurred in a practical and discursive space very different from that within which they worked. For schooling had become universal, assessment in the form of examinations was a commonplace, idiocy had become feeble-mindedness, and feeble-

mindedness had become a matter of intelligence. This transformation had occurred in the context of a field of debate that was to rack nineteenth century social and political discourse on 'the social problem' - the problem of degeneration. For Montessori's initial attention to the feeble-minded arose from a trajectory leading from the criminal anthropology of Lombroso to the preventive anthropology of Giuseppe Serge. This sought to utilise anthropology preventively through a scientific pedagogy which was based on a knowledge of childhood:[59]

> By means of education we shall seek to prevent the ultimate consequences of degeneration and disease. If criminal anthropology has been able to transform punishment in modern society, we ought to set ourselves to transform the individual in the school of the future. And with the triumph of this ideal, pedagogical anthropology will, in large measure, have taken the place of criminal anthropology, just as schools for the abnormal and weak will in large measure have taken the place of jails and hospitals.

In the light of this discussion of the psychological subject, the moral space and the educable idiot we may now proceed to examine the formation of individual psychology in England in the last years of the nineteenth century, the transformations in problems, objects, means of conceptualisation and strategies which were entailed and the conditions which made them possible.

NOTES TO CHAPTER THREE

1 The original reports by J M Itard are translated in Malson, 1972. The most comprehensive account of the incident and collection of documents is in Lane, 1977.

2 Itard,[1801] 1972, p99.

3 A good discussion of some of these issues is in Donnelly, 1977, Ch 7.

4 See, for example, Manuel, 1972.

5 Op cit, n3, pp 162-163.

6 This is discussed in more detail below. See Temkin, 1963 and Foucault, 1973, esp Ch 6.

7 Donnelly, op cit, p163.

8 Locke, [1969] 1920.

9 Ibid, p4.

10 Hacking, 1975, p33.

11 Condillac, [1746] 1971.

12 Cf Condillac, Traite des systemes, 1771.

13 Cf Foucault, 1972, pp 88-92.

14 On the place of vision in 18th century French philosophical discourse see Hacking, op cit, pp 32-33 and Foucault, 1973, esp pxii ff.

15 Condillac, [1754] 1930.

16 Ibid, p46.

17 Ibid, p3.

18 Ibid, p89.

19 Ibid, p82.

20 Diderot, Lettres sur les sourds et les muets; see also his Lettre sur les aveugles, both in Vol 1 of Oeuvres completes, 1875-6. Cf also Diderot, 1857.

21 Chesledon's account of some observations of a thirteen year old boy who was born blind and had his sight restored was published in 1728, followed by an account of the operation (Cheseldon, 1728a;1728b). Its implications were widely discussed, and were considered in Buffon's (1749) Histoire naturelle de l'homme. The techniques for the removal of cataracts were perfected in

Paris by Jacques Daviel, and reported in 1752. Cf Garrison, 1929, p343 and p 349.

22 There is a good discussion of these issues in Cassirer, 1951, Ch 3, esp p114 ff.

23 Cf Lane, op cit, n1.

24 Malson, 1972, p36. He is referring to the work reported in Kellogg and Kellogg, 1933.

25 Op cit, p285.

26 Condillac's own course of education for the Prince of Parma, 1775, which ran in its published form to some sixteen volumes of detailed instruction, was perhaps the first example of this, in the field of scientific pedagogy.

27 For phenomenotechnics see the work of Bachelard, introduced in Lecourt, 1975 and Gaukroger, 1976.

28 Itard, [1808] 1972, p99.

29 Cf Foucault, 1967, Chapter 7.

30 Battie, [1758] 1962.

31 Pargeter, 1792, quoted from Leigh, 1961, p67. Leigh provides useful material from texts of this period.

32 Quoted from Kraepelin, 1962, p76. Kraepelin cites numerous examples of German prophets of moral medicine - Reil, Heinroth, Vering, Neumann and Hoffbauer. Willis's treatment of George III is discussed, rather tendentiously, in MacAlpine and Hunter, 1969.

33 Eg Zilboorg, 1941, Ch 8.

34 Cf Tuke, [1813] 1964, p133. It should be noted at this point that despite what is suggested in currently fashionable accounts, (eg Scull, 1979; Ingleby, 1981) moral treatment neither originated outside medicine nor opposed it. What was involved was the formation of a new relation between medicine and madness and a new relation between doctor and patient. Cf also Pinel, [1801] 1806, passim.

35 Foucault, op cit, n27, p257.

36 Quoted from Kraepelin, op cit, p78.

37 Quoted in ibid, p79.

38 Quoted in Foucault, 1967, pp 266-267.

39 Quoted from Kraepelin, op cit, p78.

40 Op cit, p267.

41 For example, see Pinel, op cit; Crichton, 1798; and the texts

cited in n 30, 31 and 32.

42 Quoted from Lane, op cit, n1, pp 57-69.

43 Foucault, op cit, n6.

44 Cf Temkin, op cit, n6, and Canguilhem, 1978.

45 Voltaire, Oeuvres, Paris, 1835, vii, p472, quoted in Donnelly, op cit, n2, p161.

46 Quoted in ibid, p162.

47 Itard, 1802, quoted in Lane, op cit, n1, p77.

48 Loc cit.

49 Pinel, 1798. See the discussion in Rosen, 1946.

50 Pinel, [1801] 1806.

51 Details from Lane, op cit, n1.

52 Epee, [1784] 1801.

53 Sicard in Massieu, 1815, cited in Lane, op cit, n1.

54 Quoted from ibid, p99.

55 Esquirol, [1818] 1965, p446 and 474.

56 For Seguin see his 1866, 1870 and 1876. His work is discussed in Lane, op cit, esp Ch 10; see also Holman, 1914; Boyd, 1914 and Kraft,1961.

57 Quoted in Boyd, op cit, p 91.

58 Seguin, 1866, p199.

59 Montessori, 1909, p14; quoted in Boyd, op cit, p132. On Montessori see also Culverwell, 1913 and Fynne, 1924.

CHAPTER FOUR

THE PSYCHOLOGY OF POPULATIONS

> What man possessed of sense, curiosity or fancy, could gaze unmoved on this mixed mass of poverty, destitution and crime which makes up the lower stratum of our artificial society? How resist the question, what part of all this misery is the result of personal defects and vices - of sloth, unthrift, incapacity; how much of what may be called inaptitude in the State! How is it possible to resist the inquiry whether when more than three centuries ago, our ancestors established a poor law, they ought not rather to have given us a good police force.
>
> William Guy, 1873[1]

A psychology of the individual formed in England at the end of the nineteenth century around a problem of defective mental capacities: feeble-mindedness. We can, in crude terms, formulate the issue thus. The problem concerned not the plight of the individuals themselves, as it had for Seguin, but the consequences of such individuals with respect to the population as a whole. It was argued that feeble-mindedness was an hereditary phenomenon, that it was passed down from parents to children. Since the feeble-minded bred more rapidly than others, their proportion in the population would increase. Feeble-mindedness produced all sorts of social problems, and these problems were becoming increasingly evident in the heart of the new centres of population created by the growth of manufacture. What was occuring was a deterioration or degeneration of the race, which would weaken the country at home, and hamper it in competition abroad. Here was a matter of the gravest concern, and a proper issue for government

action. It was necessary as a matter of urgency to discover those who were mentally defective and to take steps to prevent them propagating.

The problem of the feeble-minded was posed in these terms by linking up three somewhat distinct themes. Firstly, the doctrine that the regulation of the quality of the population was a proper and important issue for government policy and action. Secondly, the argument that the conditions of urban life were deleterious to the habits and abilities of the labouring classes, and that the effect was a cumulative demoralisation of the population. Thirdly, the theory that pathological physical and moral states were the expression of a constitutional predisposition which was transmitted by heredity and which tended to become more marked with each generation, thus forming a process of degeneracy.

Each of these three themes was established by the mid-nineteenth century. When they were linked up around the problem of the feeble-minded, each was transformed. The object of this chapter is briefly to sketch out the characteristics of each theme, to set the scene for the detailed archaeological investigation which follows.

Government and population

> Next to the blessings which a Nation derives from excellent Laws ably administered, are those advantages which result from a well-regulated and energetic Police, conducted with purity, activity, vigilance and discretion.
>
> Patrick Colquhoun, 1797[2]

From the middle of the eighteenth century it is possible to identify the emergence of a recurrent theme in texts on the problems and

objectives of government. It has at its core a question of the organisation of the population and the creation and maintenance of order, morality and public tranquillity, and it is posed, in part, in terms of police. Police in the sense in which Colquhoun wrote in 1800:[3]

> Police in this country may be considered as a new science; the properties of which consist not in the judicial powers which lead to punishment, and which belong to the magistrates alone; but in the prevention and detection of crimes; and in those other functions which relate to internal regulations for the well ordering and comfort of civil society.

It is pertinent to consider in more detail what is at stake in this "subject of great importance to be known and understood". For Colquhoun it was "an improved state of Society", yet the introduction of a programme of police was opposed in England for some four decades, on the grounds that, in the words of a Parliamentary Committee of 1822:[4]

> It is difficult to reconcile an effective system of police, with that perfect freedom of action and exemption from interference, which are the great privileges and blessings of society in this country; and Your Committee think that the forfeiture or curtailment of such advantages would be too great a sacrifice for improvements in police, or facilities in detection of crime, however desirable in themselves if abstractly considered.

Put simply, what police represented was a new conception of government, of its role and functions, of its objects and of its legitimate mechanisms. It would, therefore, be wrong to see the introduction of a professional police force in 1829 as merely an extension and reorganisation of the office of constable. As is well

known, the constable, from the thirteenth century, was an elected officer who had as his responsibility the maintenance of the King's peace, by hue and cry and other means. But this merely was a systematisation of the duties of all subjects, as clarified in the Statute of Winchester of 1285, which laid down the principles of policing until 1829. Critchley summarises them as follows:[5]

> First, it was a duty of everyone to maintain the King's peace, and it was open to any citisen to arrest an offender. Second, the unpaid, part-time constable had a special duty to do so, and in the towns he was assisted in this duty by his inferior officer, the watchman. Third, if the offender was not caught red-handed, hue and cry was to be raised. Fourth, everyone was obliged to keep arms with which to follow the cry when required. Finally, the constable had a duty to present the offender at the court leet.

This Act, together with the Justice of the Peace Act of 1361, which established the Justices as the representatives of the King, concentrated judicial and administrative power in their hands and made constables subordinate to them, established the mechanism for the maintenance of the King's peace and removed the last elements of feudal rule in this area. This apparatus took shape within a conception of the Crown as the sole source of law with the sole right to hold courts and dispense justice. Law was a part of the relationship between a sovereign and his territory, and crime was an offence not against another subject but against the King's peace and the person of the sovereign himself.[6]

Michel Foucault has argued that we can observe here the operation of a particular conception of government - one that was negative, repressive, spectacular, violent, discontinuous, visible

and ex post facto. Certain acts were forbidden, but outside the infraction of a law the Sovereign had no business to interfere with the lives of his subjects. This does not imply, of course, that there was a domain of liberties, spontaneous and unregulated, but that regulation here was of a different order - dispersed, directed through custom and convention, through local bonds of deference, obligation and reciprocity. When a law was infringed, the wrong against the Sovereign was righted by a spectacular public manifestation of the power of the King. The force of law was the force of the King, and the public trial and punishment was not so much a legal as a political ritual in which the injured sovereignty was restored, and the might of the prince was re-established in the minds of his subjects.[7]

Against this, we can counterpose a different conception of government, one linked to that sense of police which was decried in the opposition to Colquhoun. As Pasquino has pointed out, it was this that Von Justi had in mind when he entitled his text of 1760 Foundations of the power and happiness of states, or an exhaustive presentation of the science of police, and of which Beccaria spoke in a course he gave in 1769:[8]

> But, neither the products of the earth, nor those of the work of the hand, nor mutual commerce, nor public contributions can ever be obtained from men with perfection and constancy if they do not know the moral and physical laws of the things upon which they act, if the increase of bodies is not proportionately accompanied by the change of social habits; if, among the multiplicity of individuals, works and products one does not at each step see shining the light of order, which renders all operations easy and sure. Thus, the sciences, education, good

> order, security and public tranquillity, objects all comprehended under the name of police, will constitute the fifth and last object of public economy.

In the eighteenth century Europe was a policed society, not in the sense of the realisation of all these programmes for the regulation of that space between the commands of the Sovereign and the daily lives of his subjects, but in the sense that these programmes were active elements in debates and practice. And we can see that these programmes entailed the organisation of the administration of multiplicities of individuals in terms of a knowledge of those multiplicities, a knowledge, that is to say, of populations. As Pasquino argues, the central tasks of police were happiness and information - the construction of a well ordered political machine and an enlightened administration depended upon a knowledge of the state of the population. "One can locate here ... the ideal point of departure for a set of knowledges and practices which are born and develop in the 17th and 18th centuries, which bear upon the social body as a population and which slowly constitute it and fashion it. I am thinking on the one hand of demography and statistics, which, as its derivation from the word Staat shows, is nothing other but the science of the State ...[On the other hand] the health of the population ... becomes a value, a new object of analysis and intervention."[9]

This links up with a thesis developed more extensively by Foucault: that it was the problem of population which enabled the positive deployment of the new art of government. Prior to the emergence of population as the object of government, this new rationale for social regulation encountered obstructions in both Mercantalism and Political Oeconomy. Mercantalism attempted to

develop a rational practice of government to be utilised by the State but nonetheless took as its instruments the very apparatus of sovereignty which it sought to oppose - laws, decrees, regulations and so forth. Further, the art of government was conceived on the model of the family. Political Oeconomy was a discourse which attempted to apply to a State a mode of government modelled upon that of a household, in particular a royal household. As Tribe has pointed out, the derivation of oeconomy from the Greek root oikonomia is crucial - for it separates the "effective and thrifty ordering of a household from the business of money getting and trade ... it covers the wise administration of the household and the maintenance of the objects of administration in their rightful place".[10] Tribe quotes Steuart:[11]

> Oeconomy, in general, is the art of providing for all the wants of a family, with prudence and frugality. If any thing necessary or useful be found wanting, if any thing provided be lost or misapplied, if any servant, any animal, be supernumerary or useless, if any one sick or infirm be neglected, we immediately perceive a want of oeconomy. The object of it, in a private family, is therefore to provide for the nourishment, the other wants, and the employment of every individual ... The whole oeconomy must be directed by the head, who is both lord and steward of the family.

A conception of government as oeonomy thus fails to pose either a shift in the mechanisms of government, (which it conceives in terms of acts of a sovereign-like statesman) nor in the object of political government (which it conceives on the model of the household). It was first of all a transformation of this second element through a change in the conception and status of the population, which enabled

the unblocking of the new art of government.

This transformation can be partially understood in terms of the operation of the discourse of statistics. Statistics, the science of state, had been initially conceived as the means of calculation to be deployed by a statesman in the determination of appropriate forms of legislation. Thus Sinclair, in 1791, defines it as enquiries "respecting the Population, the Political Circumstances, the Productions of a Country and other Matters of State,"[12] and similar positions are advanced in the texts of Conring and Aschenwall in Germany, or the Political Arithmetic of Petty and Davenant in England. These were concerned, in the main, with the means of estimating and comparing the wealth of nations, the contribution to this wealth of the size of population and its division into those pursuing different trades, with problems of the circulation of wealth, of taxation, and of the laws which regulate all these. But these statistics themselves transformed the conception of the population which they studied, gradually revealing:[13]

> that the population has its own regularities, its own rate of death, of diseases, its cycles of scarcity, etc.; statistics shows also that the domain of population carries a range of intrinsic, aggregate effects and that its phenomena, such for instance as the great epidemics, endemic levels of mortality, and the spiral of labour and wealth, are irreducible to those of the family; lastly it shows that, through its displacements, habits, activities, etc., population causes specific economic effects: statistics, in that it makes it possible to quantify the phenomena specific to population, also shows that this specificity is irreducible to the dimension of the family.

But further, it is now this population, its welfare, the

condition of its members, the increase of their health, longevity and wealth, which becomes the objective and end of government. Government now seeks to intervene in various ways into these areas, improving health, stimulating births, directing the flow of the population to various localities. These interventions require a knowledge of the immanent laws of this domain, for it is through acting upon them, rather than directly upon the consciousness of subjects, that the new art of government will operate.

However, in respect to the question which concerns the present study, the effective deployment of these new techniques of government was delimited by a corollary development. If the emergence of the problem of population separated the question of its government from issues of trade, taxation, production, and the creation and circulation of wealth, it simultaneously freed these elements for their independent elaboration, for them to become the object of a specific discourse now termed, in the nineteenth century, political economy.[14] This discourse had as its object a realm of the 'economy' in something like its modern sense, but also as something which <u>does not have to be governed</u>. The economy, as it began to take shape in the economic discourse of the early nineteenth century, was no longer to be managed like a household; it was no longer the role of the statesman to ensure that there was a proper distribution of labour to different tasks, and proper links and circulation between the different parts. It was a realm which governed itself, in virtue of its <u>internal</u> laws and principles, in respect to which the role of legislation is merely to provide the <u>external</u> conditions in which it can function. This new conceptualisation, which has been retrospectively attributed to Adam Smith, allowed the valorisation of his notion of the 'invisible hand', as that which regulates economic activity, which could be counterposed to the guiding hand of the

statesman.

Crucial for our purposes were the consequences of the establishment, by Mill, Spence and Torrens of a new 'Smithian orthodoxy' which regarded labour, not nature, as the source of all wealth and converted Smith's classification of labour according to employment into a philosophy of the unique powers of human labour.[15] We had now, on the one hand, police and the administration of populations; on the other hand, political economy and the self regulation of the economy in which wealth is a product of human labour. Let us consider the consequences of this configuration in terms of the reformation of two problems which had concerned statesmen, parish officials and others since at least the time of the passage of the Poor Laws - the problems of poverty and pauperism.

For political economy, poverty was the necessary and inexorable counterpart of wealth.[16] It was the outcome of differences in condition and an outcome which had considerable utility. It was a spur to those in poverty to better themselves and a warning which helped promote the industriousness of the middle classes. Thus poverty acted, on rich or poor alike, as an economic mechanism regulating the propensity of individuals to engage in labour. It provided a source of labour for the expansion of production, and a space within which such expansion could occur, through the extension of existing needs and the creation of new ones. The relation between poverty and wealth was functional and non-eliminable, and poverty was not an issue for government since it existed internal to the regulated order of the economy. Who better to illustrate this than that English pioneer of the art of police, Colquhoun:[17]

> Poverty is therefore a most necessary and indispensable ingredient in society without which nations and communities

could not exist in a state of civilisation. It is the lot of men.- it is the source of wealth, since without poverty there would be no labour, and without labour there could be no riches, no refinement, no comfort and no benefit to those who may be possessed of wealth ...

For most of the nineteenth century inadequacies of income as such, whether caused by low wages, irregular employment or sickness, could form neither a legitimate object of state intervention nor a specific problem for economic theory. No overall imbalance could exist between production and consumption, or between the supply and demand of labour. The aggregate wage fund at any given time was inelastic; if workmen were unable to obtain employment it was simply because they tried to sell their labour a too high a price. Gratuitous assistance to such workmen would therefore merely depress the general level of wages, discourage mobility of labour and encourage reckless procreation incommensurate with the true position of the labourer. Schemes of public employment were similarly futile and dangerous, for they diverted capital from private industry and thereby depleted the wage fund for privately employed workmen. Want of employment was thus either a short-term effect of transfer between jobs, for which workmen should provide out of their earnings whilst employed, or a voluntary condition wilfully incurred by those unwilling to accept the responsibilities of labour.

Pauperism, or indigence, however, was a different matter. It was a question external to the domain of the economy and a proper matter for regulation in the form of police. The pauper came to represent all those conducts which were anti-social, for pauperism was a rejection of regular employment which meant also an existence outside those benign self-regulating mechanisms of the economy.

Hence pauperism stood for vagrancy, promiscuity, improvidence, ignorance, insubordination - a refusal of all those relations which were so essential to a healthy, wealthy and well ordered polity. Thus Colquhoun wrote:[18]

> mendicity, vagrancy, female prostitution and criminal offences ... still continue to afflict society ... The cause of these evils may be traced principally to one source. There exists in this country nothing in the shape of a systematic superintending police, calculated to check and prevent the growth of vicious habits, and other irregularities incidental to civil society.

The doctrine of police was unable to conceptualise pauperism as engendered by economic conditions. However despite, or rather because of this, it was able to produce a mechanism for the regulation of pauperism, at least as far as the economy was concerned. The New Poor Laws, like the laws of 1601 which they replaced, were thus not concerned with poverty at all - with categories of individuals defined in relation to the necessities of life and so forth. They were concerned with pauperism, as a particular way of conceptualising certain problems of social organisation. The Elizabethan Laws had allowed relief for the impotent (aged, chronic sick, blind, lunatics) in poorhouses or almshouses; for the able-bodied, however, whether vagrant, persistent absconder or idler, the remedy was to be set to work in a House of Correction. But political economy rejected the existing ways of conceiving of and providing for those who did not appear to fit into those categories and yet were unable to provide for themselves adequately through their own employ. 'Speenhamland' arrangements, originally allowances based upon the price of bread to supplement the low wages of those in employment, but later extended to a variety of

measures including payments to families based upon the numbers of children, were widely utilised at the end of the eighteenth and beginning of the nineteenth centuries to cope with threats of unrest in response to the scarcity resulting from bad harvests and economic fluctuations. Such arrangements were first called into question on account of the variations between localities, the soaring costs of poor relief to which they were believed to have led, and their failure to avert the burning of hayricks and threats of mass violence - as in the Surrey Riots of 1830, for which nine were hanged and nine hundred transported.[19]

But it was not the disruptions themselves which produced the New Poor Law: change may have been conditional upon disruption but the form of the change depended upon the way this disruption was conceptualised. The different tendencies and positions within political economy all combined in their view of the Poor Laws as self-defeating and a cause of the very problems they sought to solve. Thus Smith condemmed them as interfering with the construction of a free market through the restrictions which the Laws of Settlement imposed upon the mobility of labour; Malthus considered allowances based upon family size to be an encouragement to improvident marriage and the production of children and hence of more pauperism; Ricardo considered that what was paid out in relief was withdrawn from the wage fund and hence reduced employment and threw more into pauperism. It was from within political economy that Chadwick and Senior wrote their famous Report, from a commission set up in response to the riots. Their Report has recently been much criticised, in respect to whether the statistics it gathered supported the interpretations drawn. This is, of course, beside the point; what is of consequence is what was considered to be the case, why, and what the consequences were.[20]

The central principle through which the New Poor Laws were to restore the economy to its free and automatic functioning was that of 'less eligibility'; it was this which enabled Chadwick to argue that they were the first great piece of legislation based upon scientific principles and a great engine of social improvement. Less eligibility sought to solve the problem of pauperisation, to remove the poor from the operation of the Poor Law, and to restore the principle of work:[21]

> The first and most essential of all conditions; a principle we find universally admitted ... is that [the pauper's] situation on the whole shall not be made really or apparently so eligible as the situation of the independent labourer of the lowest class ... Every penny bestowed that tends to render the condition of the pauper more eligible than that of the independent labourer is a bounty on indolence and vice.

There was, as has been well recognised, a definite conception of the determinants of individual action within political economy. This formed the underpinning for both its conception of economic activity and for the operation of the principle of less eligibility: the rational calculus of pleasures and pains most clearly stated by Jeremy Bentham. But such a conception depended upon the assumption that it was universal - nothing specific marked out the pauper, the criminal or any other from the mass of the people, apart from those actions to which the operation of this universal calculus of desires had lead them. Whilst the character of those who stood outside the social order might well have been the subject of moral or religious criticism, or the target of reformatory techniques, it did not have a specific and systematic status within this discourse. A

reformulation of the problem of population and the objectives and means of its regulation; a shift in the location and formulation of the central problem facing government; a new conception of the determinants of socially unacceptable conduct; a new way of posing the issue of 'want of employment' - all these would have to take shape before a psychological conception of individual pathology could form and play a central role in a strategy of social regulation.

Hobsbawm writes that "by the middle of the nineteenth century, government policy in Britain came as near laissez-faire as has ever been practicable in a modern state".[22] But laissez-faire was not a real state of absence of governmental regulation, it was a definite political doctrine determining the form and objectives which governmental action should take. Dicey recognised this when he wrote that "sincere believers in laissez-faire found that for the attainment of their ends the improvement and strengthening of government machinery was an absolute necessity"[23] However, political economy as a doctrine of government placed definite limits upon the form and extent of social regulation of the conditions of the population in the early decades of the nineteenth century. By the middle of the century the dominance of political economy was displaced as a range of problems for government emerged not in the countryside but in the towns. In this shift of focus, the order of priority of political economy and police was reversed, and the conception of population which was the object of government action was transformed. The problem of pauperism, with all that it represented in the way of anti-sociality, was, first, linked to the towns, and, second, referred back in a new way to the question of labour. By the end of the nineteenth century a new and systematic mode of conceptualisation of the social problem was operative, one

posed in terms of the danger of urban degeneracy, the key role of casual labour, the rate of reproduction of unemployables and its consequences. These transformations provided conditions for the formation of a psychological conception of individual pathology. The practices of health, hospitals, hygiene, philanthropy and police threw up new problems for psychological conceptualisation and, later, a strategic configuration formed within which these psychological conceptions had a leading role - that of eugenics.

Demoralisation in towns

The emergence of a social theory of urban demoralisation in the mid-nineeenth century has been well documented, and here I will outline only its essential form.[24] The concentration of the lower orders in the heart of the great cities created by industrialisation gradually came to dominate the concerns of politicians, the early social investigators organised in Statistical Societies, philanthropists and the Church. The problem was first posed as one of the loss of moral values engendered by the conditions of existence of this class. It was disease which provided the model for this analysis; to be more precise it was a particular conception of the nature and causes of epidemics. The pathology which threatened this class, and which threatened to spread from them to other sections of society, was engendered by the characteristics of the social space in which they were located, a space in which moral contagion could spread through a kind of pernicious miasma, existing within the milieu and having its deleterious effects upon those forced into contact with it.[25]

The lowest elements attracted into towns by the prospect of easy pickings, and others forced into towns by the necessity of finding work, were concentrated together into large and impenetrable masses, isolated from the beneficent influences of civilisation,

losing whatever virtuous habits they might have had and contracting bad ones - intemperance, irreligion, insubordination, prostitution, idleness. In brief, they were subject to demoralisation. Thus a Select Committee of 1838 was extremely disturbed that there were:[26]

> districts in London through which no great thoroughfare passed, and which were wholly occupied by a dense population composed of the lower class of person who being entirely secluded from the observation and influence of better educated neighbours, exhibited a state of moral degradation deeply to be deplored.

In these colonies and rookeries, vice and immorality flourished without check, leading to the degradation of the worker and the transmission of these immoral habits to their offspring who were brought up in an overcrowded, insanitary atmosphere, forced at a tender age into contact with sights and experiences of corruption and crime. The solution proposed in the early decades of the century was one consistent with the way in which the problem was construed. It consisted of grand schemes of social hygiene which attempted to break up these enclaves, to render them accessible to the influences of civilised society and its systems of regulation and police, to disperse these teeming multiplicities, regulate the promiscuous interminglings, eliminate anti-social habits and so forth. The proposals of William Farr, the street clearance schemes, the programmes for the construction of model dwellings were within this strategy; they sought to reorganise the moral milieu and conditions of life of those not yet hopelessly degraded, to produce an atmosphere of decency and morality within these homes, and effect a separation between what Mary Carpenter was to term the 'perishing' and the 'dangerous' classes.[27]

But the history of these schemes, whether undertaken by

philanthropy, by local administrators, or regulated centrally through legislation, was perceived as one of failure. The street clearances, the model dwellings, the sanitary regulations, whilst they reclaimed a small number of the respectable poor, actually appeared to be exacerbating the demoralisation of those others who, displaced by these very schemes, were forced into even worse conditions of life.[28] In the middle of the nineteenth century, a very significant inflection occurred in the way in which the social problem of the towns began to be posed. It began to be argued that schemes of social hygiene increased overcrowding through large-scale demolition whilst doing nothing to change the situation whereby honest working men, in order to obtain employment, had to reside in the centre of towns. And the question of employment and its relation to socially undesirable habits and morals, rapidly came to centre upon the problem of casual labour.

A number of factors conspired, no doubt, to produce the centrality of the problem of casual labour in the last half of the nineteenth century. The 'Great Depression' was in fact a period of rising real wages and prosperity for the majority of the working class, and the conjunction of high wages for the majority with poverty for the few emphasised the economic and social distinctions between those in regular employment and those in want of such employment. For the first time, in the closing decades, a conception began to develop of the unemployed as a distinct grouping with specific social characteristics. A certain emphasis and urgency was undoubtedly lent to this question by the growth of direct action on the part of this grouping, and by the activities of Hyndeman's Social Democratic Federation, even though at the level of central government these occurrences were occasions for raising issues of public order

rather than of the causes of social distress.[29]

But the concern with casual labour in particular was also the product of other factors. The work of the Statistical Societies had developed the notion of 'family budgets' in the context of studies of 'the condition of the poor' and had increasingly constructed a systematic link between lack or irregularity of employment and social distress.[30] Mayhew's work in particular drew attention to the large number of families in London dependent on employment which was, to a greater or lesser extent, irregular or occasional, contingent upon particular times, seasons, fashions and accidents.[31] And casual labourers were repeatedly discovered to comprise the vast number of those applying to the various schemes of relief operated over this period.[32] Charles Booth's massive enquiry served to confirm the exemplary status of casual labour in the 'social question', and of casual labourers as the focus of practices of social administration. This status was to be retained into the early decades of the twentieth century, but in highlighting it, Booth's arguments also represent a transformation in the status and function of casual labour and in the way in which the problem of the towns was posed.

In the New Poor Law, the distinction between pauperism and poverty was unitary and qualitative. Booth's mode of conceptualisation was significantly different.[33] He operated with a conception of the population as a continuous distribution of individuals with varying characteristics. Thus the eight classes into which he divided the population of London were indications of locations upon a continuum, rather than descriptions of a fixed typology. Four classes constituted together the thirty-five percent of the population in poverty: classes D, C, B and A. Class D were the small regular earners, comprising some 14.5% of the population, "the better end of the casual dock and water-side labour". Class C

were the intermittant earners (8%), "on them falls with particular severity the weight of recurrent depressions of trade ... here may perhaps be found the most proper field for charitable assistance", provided, of course, that such assistance was conditional upon the thrift of the recipients. Class B were the casual earners, the very poor, making up some 11.25%, "the ideal of such persons is to work when they like and play when they like; these it is who are rightly called the 'leisure class' among the poor - leisure bounded very closely by the pressure of want, but habitual to the extent of second nature". The lowest class was class A - estimated at 1.25% but, "these people are beyond number". They were the occasional labourers, loafers and semi-criminals, "their life is the life of savages, with vicissitudes of extreme hardship and occasional excess ... They render no useful service, they create no wealth: more often they destroy it. They degrade whatever they touch, and as individuals are perhaps incapable of improvement." What is significant about Booth's characterisation of these classes is, first of all, the way in which they constituted a continuum along which income level, conditions of life and nature of employment were amalgamated together and unified through the notion of individual character. Hence Booth's 'moralism' was not simply an idiosyncratic addendum to an otherwise objective set of social categories, it was constitutive of those categories themselves.

Secondly, what was crucial was the fact that, for Booth, the location of individuals upon this continuum was the outcome of an interaction between character and environment, an interaction which is progressive and cumulative - nature of employment affected income which affected conditions of life which affected character, which affected nature of employment and so on - a spiral which could be

either virtuous or vicious. And crucially, this spiral acted not only within a single generation but across generations.[34] The notion of demoralisation which had lain behind the earlier strategy of social hygiene had had no cumulative implications, demoralisation being transmitted to children only at the same level as that at which it already existed, through the habits which they formed or failed to form. It was hence remediable, given improvement in milieu. Booth's work, however, is indicative of a relocation of the question of pauperism within a space structured by the passage of time, by generations, reproduction and change. A shift from the 'tableau of pauperism' to the 'cycle of depravation', in which, as we shall see, the issue of character was to become crucial.[35]

The last twenty years of the nineteenth century saw the categories of pauperism and poverty placed in a dynamic relation, and the evils of town life represented as a process; a theory, that is to say, not simply of urban vice but of the progressively deepening decay of the quality of the race. The towns, and London in particular, were acting as foci for a whole system of deterioration, as sinks down whose drains the quality of the population was fast disappearing. The stages were clear: immigration from the country to the towns ... gradual deterioration over several generations consisting in the weakening of constitution both moral and physical ... casual labour ... entry to the lowest class of all, the unemployables. From pamphleteers like Arnold White to administrators like Llewellyn-Smith and economic theorists like Alfred Marshall, the theory of rural immigration and urban deterioration was the principle around which the social question was organised.[36] First, the towns, like magnets, sucked the best blood from the countryside; these rural immigrants displaced the weakly urban dweller, forcing the native down the spiral in the struggle for existence in the towns; then

progressively the effect of town life weakened even the best of rural stock:[37]

> The large towns, and especially London, absorb the very blood from all the rest of England; the most enterprising, the most highly gifted, those with the highest physique and the strongest characters go there to find scope for their abilities. But by the time their children and children's children have grown up without healthy play, and without fresh air there is little trace left of their original vigour ... only a very small proportion of those artisans to whom London owes its pre-eminence as a centre of highly skilled work come from parents who were born there; and there are scarcely any whose grandparents were born there.

The result was clear - a gradual deterioration progressively increased the ranks of the lowest of all classes, that class destined to cause the maximum harm to national life, whose individual members might be short-lived but the very nature of urban existence was constantly providing with increasing numbers of new recruits.

Of course, the prevalence of 'social darwinism' at the end of the nineteenth century has been much discussed. But this easy reference can obscure both the conditions under which such type of explanation could appear and function, and the particular characteristics of the many different and opposing strategies which share a 'darwinian' language and general mode of argument. It is certainly true that the strategy which we have just been discussing systematically runs together evolutionary and moral discourses, and opens up the closed moral category of pauperism to the exigencies of time and chance, variation and competition, struggle for survival and consequences for the fitness of the population. But what is

important here are the specific effects of these arguments - in particular the way in which they transformed the status of casual labour. Casual labour occupied a crucial place. Booth wrote, of his Class B, that it was "not so much one in which men are born and live and die, so much as a deposit of those who from mental, moral and physical reasons are incapable of better work", and whilst the more industrious or capable rise again into Classes C, D or E, those who fail to find regular employment sink down into Class A.[38] Casual labour was thus the site, par excellence, of competition and the struggle for survival. It was also situated in the position of a relay, for it operated the critical mediation between the improvable and the unimprovable. That is to say between those who, through labour and appropriate charitable help could be morally and industrially regenerated and move back up through the spiral in a reverse direction, and those who could not, who were hopeless, worthless and unimproveable - the group that came to be known as the residuum. Casual labour was thus a sort of no-man's-land between the inside and the outside of civilisation, but the current within it pulled almost irresistibly in one direction, spiralling those who entered towards unemployability.

The category of the unemployable thus began to take over from that of the pauper as the condensation of all those anti-social forms of conduct and vices which threatened good order and public tranquillity. This category was also productively ambiguous. 'Unemployable' was a series of forms of conduct, habits, behaviours, which were both the corrolary of a certain position in relation to labour, and the outward and visible signs of an inward stae of character. In relation to unemployability, character was both cause and effect. Cause to the extent that character was the explanation of why certain individuals came to be unemployable; effect to the

extent that it was the consequence of dependence upon casual labour, through the effects of the casual labour market and the conditions of life associated with it.[39]

From Booth to Beveridge, the schemes of de-casualisation had as their objective the re-establishment by administrative means of the boundary between the employable and the unemployable. They sought to bring to the former the beneficent and educational discipline of regular employment whilst exposing the latter for the harsh but necessary remedy their condition demanded:[40]

> It is essential to maintain the distinction between those who, however irregularly employed, are yet members, though inferior members, of the industrial army and those who are mere parasites, incapable of performing any useful service whatever. And it is equally important to remember that degradation of character is directly traceable, not to original sin, but to industrial conditions, so that by altering the conditions of employment it is possible to check, in part at least, the supply of 'unemployables'.

The distinction made here by Beveridge was between membership of society and exclusion from it. The employable were to be granted full employment, average earnings, civil liberties, and political power, whilst the unemployable had to be:[41]

> removed from free industry and maintained adequately in public institutions, but with the complete and permanent loss of all citizenship rights... To those, moreover, if any, who may be born personally efficient but in excess of the number for whom the country can provide, a clear choice will be offered: loss of independence by entering a public institution, emigration or immediate starvation.

The residuum of unemployables became, for social administrators, the focus of all those forms of vice that infected the towns and flourished in the margins of civilisation - vagrancy, crime, prostitution, inebriety - linked around the defective character of the individuals concerned. This defect was both physical - poor eyesight, bad hearing, small size, scrofula, phthisis - and mental - both moral and intellectual faculties being subject to deterioration.

There was, however, an important difference between the way in which Booth formulated his proposals for labour colonies and the formulations of Beveridge. For Booth, the rationale of the removal of the casual poor to colonies was that this would do away with the demoralising casual labour market, remove a source of social vice, and eliminate a competitive pressure upon the more respectable and employable poor.[42] Beveridge had added a further imperative - the unemployables were to be denied the right to reproduce. Procreation had become a central element in the way in which the genesis of the social problem was construed. In this shift we can see the signs of the reorganisation of the problem of degeneration in a manner amenable to a eugenic strategy. In this strategy, a conception of individual pathology would be linked with a statistical discourse on the distribution of human abilities in the population, a biological theory of the inheritance of abilities and their transmission across generations, a demonstration of the consequences of the reproductive levels of different social groups and a socio-political analysis of the consequences of the quality or efficiency of the population for the well being and success of the nation.

In the closing decades of the nineteenth century, the problems of the great cities began to be posed in a different way. The

deterioration of their inhabitants was not now seen as a consequence of the effects of conditions of life upon character - profligacy, idleness, intemperance and the absence of religious influences leading to demoralisation. Rather, these forms of anti-social behaviour were seen as the outcome of an inherited unfitnesss. The danger to the race was not therefore treatable by ameliorating conditions of life - this would only be treating the symptoms. The problem was a consequence of the fact that paupers, criminals and others of the lower moral type were breeding more rapidly than the strong and capable. As White put it:[43]

> Tainted constitutions, brains charged with subtle mischief, and languishing or extinct morality, transmit a terrible inheritance of evil to the next generation, there to taint once more a whole community. And those who multiply as ephemera are the squalid inhabitants of hovels subsisting on degraded and adulterated foods; and acquiring their joys from the gratification of lust, and the absorbtion in excess of drugged and poisonous forms of alchohol. We thus have a practical example of the fact that the tendency of the higher civilisation is to multiply from the lower and not from the higher specimens of the race.

The problem, that is to say, was not simply one of demoralisation in towns, but a prospect of the degeneration of the race. And the solution that was suggested had as its central plank the prevention of those with such tainted constitutions from propagating their kind at all, by sterilisation and/or permanent segregation.

Whilst in the late 1880s the analysis and solution proposed by people like White was marginal and idiosyncratic, by the begining of the twentieth century an extensive and forceful social strategy would be organised in these terms. In order to understand this shift, in

which the mechanism of differential reproduction had begun to replace that of the cumulative interaction of constitution and conditions of life, let us turn to consider the scientific theory of degeneracy, as it was formulated in the mid-nineteenth century, and the conception of heredity which it entailed.

Theoretical degeneracy

Degeneracy was not merely a term bandied about by critics of social and political arrangements in the second half of the nineteenth century; it was also a theme which organised much theoretical argument in medicine, in anthropology, in criminology and in psychological medicine - that is to say arguments concerning the nature of pathologies of behaviour, intellect and morals up until the early decades of the twentieth century.

Michel Foucault has suggested that, in the mid-nineteenth century, one can observe the "opening up of the great medico-psychological domain of the 'perversions' which was destined to take over from the old moral categories of debauchery and excess." This domain was immediately organised in terms of a mechanism of heredity and a process of degeneracy, a series composed of perversion-heredity-degenerescence, in which the theory of degenerescence:[44]

> explained how a heredity that was burdened with various maladies (it made little difference whether these were organic, functional or psychical) ended by producing a sexual pervert (look into the genealogy of an exhibitionist or a homosexual: you will find a hemiplegic ancestor, a phthisic parent, or an uncle afflicted with senile dementia); but it went on to explain how a sexual perversion resulted in the depletion of one's line of descent - rickets in the children, the sterility of future

generations.

Of course, reference to heredity in the explanation of mental pathology was a theme with a long history. It was certainly not incompatible with theories of the moral genesis of insanity, but within the moral medicine which we discussed in the last chapter the pertinence of this reference was, as we have seen, delimited and restricted. From about 1820 onwards, this question began to be posed in a new and characteristic way.

Heredity operated in relation to mental pathology through the transmission of a 'constitution'. Constitution was an organic state which might be strong or weak. It could predispose an individual to certain ills, and this predisposition might or might not manifest itself depending upon the nature of the 'circumstances' in which individuals were reared and lived. By the mid-nineteenth century, the idea that mental pathology had a physiological or organic basis, an origin in a neuropathic constitution, intimately linked to the make-up of the brain and transmissible across generations was well established. Thus in 1858 Bucknill and Tuke wrote:[45]

> The physiological principle upon which we have to build a system of cerebral pathology is, that mental health is dependent upon the due nutrition, stimulation, and repose of the brain; that is, upon the conditions of exhaustion and reparation of its nerve substance being maintained in a healthy and regular state; and that mental disease results from the interruption or disturbance of these conditions.

Thus changes in speech, emotion, intellect or conduct were now considered to be consequential upon organic changes of the brain.

It was not that the inventories of causes of insanity which we discussed in the last chapter disappeared. Rather, they were reworked into a new distribution, according to a division between

predisposing and exciting causes. Inherited weaknesses, lesions or malfunctions in the brain could act as predisposing causes of insanity. Disorders of the blood, of the liver, intoxication and so forth could either directly cause insanity, through producing alterations in the brain, or weaken the brain and henceforth act as predisposing causes. Moral depravity, indulgence, excess, intemperance or extremes of emotion could be predisposing causes if they were present in a parent at the time of conception or in the mother whilst the individual was in utero or suckling - in these cases they could have their effects through acting on the constitution of the growing child. Similarly bad management when the child was young might be a predisposing cause, by affecting the development of the brain or nervous system. And all the moral excesses familiar from earlier arguments could now be redeployed as exciting causes, which could provoke the onset of insanity. Thus although the notion of constitution was deployed in the texts of this period to contest theories of insanity as consisting of an exclusively moral disturbance, it nonetheless allowed the preservation of the linkage between madness and immorality.

Discussions of the emergence of this constitutionalist medical psychology point to Gall and Spurzheim's phrenology in the period from about 1800 to 1820, promoted in England by George Combe, which conceived of mental faculties in terms of localised brain functions. They also indicate the rise of pathological anatomy and the use of post-mortem examinations of brains, tissues and blood vessels in those who died insane, and also the development of neurophysiology - especially the work of Carpenter.[46] But perhaps it is useful also to draw attention to a shift which occurred at a rather different level.

The conception of constitution which was central to this mode of

conceptualisation was of an organised and systematised nature within each individual which mediated between experience and behaviour. In the texts of this period, the notion of constitution was deployed in contesting the empiricist and experiential moral theories of the origins of insanity traced from Locke and Condillac. Constitution pre-dated and shaped experience, it was the locus of effects of heredity across generations and of circumstances - morality or immorality, temperance or inebriety and so forth - within the life history of any individual. Such a concept was dependent upon the transformation of the object of a science of biology at the end of the eighteenth century: living beings were now conceived of in terms of their systematic organisation, and it was this systematic relationship amongst organs and functions which was definitive of life and which was doomed to die. The view of living bodies as consisting in a dynamic internal organisation was necessary for the development of a conception of a constitution which could be normal or abnormal, and which had consequences which could be conveyed through heredity. For if organisms functioned according to a plan, and if each generation in its turn was fabricated according to the plan transmitted to it, was re-produced, then deficiencies, variations, malformations in this plan could lead to a variety of pathological consequences in the offspring. Here too it is possible to locate the conventional acceptance within nineteenth century biology of the action of the environment upon heredity - the inheritance of acquired characteristics. The plan of organisation could not adapt in and of itself; transformations in it were consequent upon the circumstances of organisms, which produced modifications which were then transmitted to future generations. As Jacob puts it, "the plasticity of living structures and the flexibility of their mechanisms allow the organism, not to insert

itself into the surrounding world, but on the contrary to insert this world gradually into its heredity".[47]

This underpinned the theory of heredity which was conventional at the beginning of the nineteenth century, and which remained in essence unchallenged until the beginning of the twentieth century. Charles Rosenberg, in his study of heredity and social thought in nineteenth century America, has identified four important elements of this theory.[48] Firstly that acquired characteristics could be inherited, so that the events of an individual's life, inscribed upon their constitution, could be transmitted to their offspring. Secondly that heredity was an extended process, beginning with conception and ending only with weaning. Not only the constitution of the parents but also their condition at the moment of conception (inebriety, anxiety...) could have a crucial impact upon the child so conceived, as could events which occurred to the mother during pregnancy or whilst suckling the child. These were transmitted to the child via the blood of the mother, or through her milk, and again were permanently installed in the child's constitution despite being only temporarily present in the parent. Thirdly, what was inherited was not a specific condition or attribute but a predisposition, a tendency. Thus pathology was not passed down in the form of discrete or unitary qualities, but in the form of a 'diathesis' which, given the presence of certain exciting causes, could develop into one or other specific form of pathology. Fourthly, less significant for the present discussion, that the sexes played distinct roles in heredity, the mother contributing temperament, internal viscera, stamina and vitality; the father, intellect and musculature. Until the last decade of the nineteenth century, and despite the theories of both Galton and Weissmann, this form of explanation held sway. It was not

until some twenty years after the publication of Weissmann's arguments that the distinction between innate and acquired, so natural to us today, began to establish itself in theoretical, let alone popular, discourse.

But there is a third aspect to the fundamental transformation in biological thought which occurred in the early nineteenth century, which permitted the reformulation of the theory of heredity in a manner which was to have profound social consequences. The idea of organisation as the object of a science of biology was intimately linked to that of history. During the eighteenth century, and thus, of course, long before Darwin, time began to introduce itself into the living world. Firstly in the notion of cataclysm, notably developed by Buffon. Later, in the writings of Bonnet and Robinet, the conception of a single chain of order, of progression, a translation of all living things from the simple towards the complex. With Lamarck, however, it was organisation as a whole which became subject to progressive transformation and which had the capacity to transform itself. All living beings could now be linked into a single history describing their generation one from another. Time became one of the main operative factors in the living world but, for Lamarck, the mode of its operation was teleological - earlier meant simpler and simpler meant less perfect. Thus one had a continuum of beings from less to more perfect, and hence the possibility of living beings being more or less advanced along it - time had inscribed itself within the very structure of creatures. Variations in that structure could thus be represented as regressions down this continuum, variations destroying perfection, organisation and complexity. It was the combination of a notion of organisation, a theory of heredity and an axis of temporality which made a theory of degeneracy possible.[49]

It was first of all in France that such a theory was formulated, in the writings of Lucas, Moreau de Tours and, principally, Morel.[50] In this work, this notion of heredity - the transmission of a constitutional predisposition which could express itself in a range of conditions from scrofula to melancholia; the linkage of generations in a single field of time and perfection - was articulated into a systematic theory of degradation or degenerescence. Let us focus on Morel.

Morel defined degenerations as deviations from normal human type which were transmissible by heredity and which deteriorated progressively towards extinction. There were six crucial elements of a theory of degeneration:

First, the heterogeneity of causation. According to Morel, degenerations could be caused by (a) intoxication (malaria, alcohol, opium, soil conducive to cretinism, epidemics, food poisoning), (b) the social milieu, (c) pathological temperament, (d) moral sickness, (e) inborn or acquired damage, (f) heredity.

Second, the fact that once acquired, and however acquired, the condition was hereditarily transmitted.

Third, the unification of all pathologies as deviations, and of all deviations as degeneracies - anxiety, alcoholism, idiocy, mania, melancholia were all forms of degeneracy.

Fourth, the unity of the individual as an organism, all parts of whose structure and functioning expressed the degeneracy. Thus degeneration was not confined to one particular behaviour or function; one could observe the degree of degeneracy alike in all aspects of the individual - head shape, facial features, body make-up, comportment, voice - all these both manifested degeneracy and were stigmata of degeneracy. This latter was a fact of considerable

diagnostic importance.

Fifth, the absence of constraint over the form in which degeneracy was expressed in any one generation by its form in the preceding generation - mania in one generation could be cretinism in the next and so forth.

Sixth, the fact, modifying the last point, that since degeneration was subject to the law of progressivity, it would tend, across generations, to the extinction of the degenerate line. The first generation in a degenerate family history might thus perhaps show simple nervousness, the second might show neurosis, the third psychosis, the fourth idiocy, with no fifth generation being conceived.

By the second half of the nineteenth century, therefore there was a firm scientific foundation for the conception of degeneracy that was deployed in social and political debate. It was backed by a set of accepted theoretical arguments and was linked to an established body of empirical evidence and clinical observation. The notion of degeneracy gave the issue of hereditary predispositions a new social pertinence. In the first half of the nineteenth century, the links between mental pathology and social pathology were contingent and residual. Burrows, for example, in 1828, accepted that an hereditary predisposition could manifest itself almost interchangeably in a range of pathologies, but did not suggest any systematic link between these pathologies and the social problems of pauperism, criminality or vice.[51] Bucknill and Tuke, thirty years later, accepted the notion of an heredity which might be manifested in intemperance or excited by it, but the immorality of the behaviour per se was pertinent only for its diagnostic or aetiological utility.[52] Similarly, Duncan and Millard discussed the question of pauper idiots, but without any suggestion that the one aspect was

linked to the other, or that a congenital disposition to idiocy had any significance in relation to pauperism.[53]

But from about 1860 onwards, degeneracy began to provide the means of posing a whole range of questions concerning social and mental pathology. The spiral of urban deterioration, and the interrelations of character and conditions of life, began to be conceived in terms of the ways in which the former was an effect of, and the latter had consequences for, an heritable constitution. For although degeneracy arguments maintained, indeed required, the view that acquired characteristics could be inherited, the priority of heredity over circumstances was absolute. Whilst writers disagreed over the inevitability with which an inherited degenerate constitution would express itself, and hence over the importance of careful early diagnosis and nurture of those suspected of carrying the taint, there was no doubt that the neuropathic constitution, once established, could not be overruled by environment, but only provoked or exacerbated to a greater or lesser extent. Heredity, the constitution which is inherited, now began to be seen as circumscribing the possible effects of circumstances or education - these could develop or not develop aspects of constitution, but could not produce results outside the boundaries set by heredity.

Further, degeneration itself owed its cumulative character to a number of features, two of which are especially significant. The first was the undoubted tendency of those with a neuropathic constitution to intermarry. Whilst authors tended to demonstrate this empirically, through the presentation of family histories, rather than to explain it theoretically, its consequences were very clear: that in each subsequent generation the degree of inherited taint was increased due to the contributions of degenerate heredity

from both mother and father. This was a fact which was destined to have important social implications.

The second reason for the cumulative nature of degeneracy lay in the consequences of a degenerate or neuropathic constitution for the conduct of the neuropath's life, and the fact that the influence of life circumstances upon constitution was in one direction only. Since neuropaths would undoubtedly be led into various unsavoury and immoral forms of life, and since the influence of experience could only be to increase, never to reduce, the degree of hereditary taint, the inheritance of acquired characteristics would necessarily lead down the spiral path of degeneration. The moral faults of individuals, even when they produced no immediate damage to others - lone alcoholism or, in particular, masturbation - were no longer simply 'solitary vices' which merely influenced the moral status of the individual concerned. They had the gravest consequences for the remainder of his or her life and for the lives of future generations. Degeneracy was thus a principle which could operate both upon an individual's life history and across generations, and these two factors were reciprocally linked and mutually reinforcing. The translation of moral condemnation from the domain of ethics to that of science was thus not a distortion or corruption of such a theoretical discourse - it was constitutive of it.

It is important to draw attention to one final aspect of these arguments about degeneracy. The notion that the behaviour, speech, appearance and comportment of the body form a unified field of expression of a degenerate constitution was the condition for the reverse movement which would be of such importance within this form of explanation. Here, these visible elements became the identifiable stigmata in which degeneracy was marked clearly on the body of its victim, and which those versed in the language of the body could

utilise in their diagnoses. Hence the significance of the appearance of the body, not only in the criminal anthropology of Lombroso, but also in all those illustrations of different degenerate types which were liberally and dolefully distributed through the textbooks of the day, each with its pathetic caption: an elderly female in whom lascivious ideas predominate constituting the variety Monomania with love, or Nymphomania; a man in a state of Imbecility: he received a good education but indulgence in solitary vice brought on a state of general imbecility; and so forth. The need for a test of intelligence would arise, in part, from a questioning of this possibility of reading internal states from outward appearances.

The linked conceptions of an inherited constitution and a process of degeneracy were significant in social and political arguments in a number of ways. Firstly, a whole range of anti-social behaviours were now linked up as different expressions of a pathological organic state. The possibility that criminal behaviour might be the outcome of a diseased mind, rather that of an act of will, was the focus of major controversy.[54] More important for our current concerns was the way in which the relationship between all these forms of immoral conduct from vice and debauchery, through indigence and crime, to idiocy and insanity was re-posed: they could now form the object of a unified system of explanation.

In France there was a general acceptance of fully developed degeneracy theories of progressive decline in the medical psychology of the late nineteenth century, especially as represented in the work of Magnan.[55] According to Ellenberger "there came a point where almost all diagnostic certificates in French mental hospitals began with the words <u>degenerescence mentale, avec ...</u> (mental

degeneration, with ...) upon which the main symptoms were listed."[56] In England the position was more complex, but it is certainly true that hereditarian and organicist theories of mental pathology were dominant in the last decades of the nineteenth century, and that the therapeutic optimism associated with moral treatment was overturned. Henry Maudsley, the most notable English proponent of the theory of degeneracy, limited the effects of environment to those of causing organic damage to the brain or nervous system, although allowing that these could sometimes occur at conception, during gestation, or in the early years when the system was delicate and susceptible. But in as many as three cases out of four, insanity was the product of an inherited constitutional predisposition, whose effects could not be escaped although they might be mitigated by the inculcation of correct moral habits and the avoidance of all those forms of excess which might occasion the onset of insanity.[57]

However, a second aspect of degeneracy theories is even more significant for the present discussion. It is certainly true that degeneracy introduced the dimension of temporality into problems of mental and social pathology. Pathological constitutions were inherited, they might show themselves in any one of a number of disorders of body, mind or conduct(epilepsy, neuralgia, eccentricity, intemperance, scrofula, phthisis, diabetes and so on) and, for all the reasons discussed above, there was a cumulative worsening of the condition from generation to generation. But the crucial point was that the family history ended in sterility - <u>degeneracy was self limiting</u>. Thus Maudsley argued that, with the individual with an insane temperament, "hereditary predisposition has assumed the character of deterioration of race", and that:[58]

> the individual represents the beginning of a degeneracy which ... will go on increasing from generation to generation and end

finally in the extreme degeneration of idiocy. With the occurrence of idiocy there is happily the extinction of the degenerate variety, for with it come impotence and sterility.

The theory of degeneracy, as it developed from Morel to Maudsley, ensured that no deleterious evolutionary consequences could flow from progressive deterioration - indeed the whole process could be conceived as a beneficial way of eliminating unhealthy variations. Thus whilst degeneration was cumulative along any particular line, it had no significant effects in the long term on the make up of the population as a whole, for the consequence of the passage of generations was to prevent breeding from the degenerate variety.

At the end of the nineteenth century, there was a radical shift in the way in which the link between constitution, reproduction and inheritance was posed. This reversed the argument concerning breeding and degeneracy, claiming that those with pathological constitutions reproduced at a greater rate that others. Hence it also reversed the link between family histories and population characteristics - we see not the elimination of the degenerate variety but its proliferation. In the science of eugenics, first formulated by Francis Galton, a new set of connections were made between individual character and its hereditary determinants, the ills of modern existence and a set of proposals for government regulation of the population.

Hence it is an oversimplification to analyse the events we have been discussing in terms of 'social darwinism' and/or its consonance with the interests and aspirations of a certain class or professional group. Not only did arguments draw upon elements which pre-dated and were independent of Darwin's writings, they also combined these elements with aspects of the theory of evolution in different ways

and with different consequences. To understand the way in which the social question was posed at the end of the nineteenth century, it is necessary to be more precise. The psychology of the individual was born in a new way of conceptualising the population and its variations, and a new way of evaluating the consequences of hereditary transmission across generations.

NOTES TO CHAPTER FOUR

1 Guy, 1873, p472.

2 Colquhoun, 1797, p1.

3 Colquhoun, 1800, Preface.

4 Quoted in Critchley, 1967, p47.

5 Ibid, p7.

6 Cf Foucault, [1975] 1977, Part 1; Jeffry, 1968; Parks, 1976.

7 Foucault, op cit; cf also Hay, 1975.

8 Beccaria Bonesara, 1804, pp 22-23; quoted in Pasquino, 1978, p45.

9 Pasquino, op cit, p51. cf also Foucault's remarks on biopolitics in History of Sexuality, [1976] 1979a, and in Foucault, 1979b.

10 Tribe, 1979, p82.

11 Steuart, [1767]1966, vol 1, p15; quoted in Tribe, op cit, p83.

12 Sinclair, 1791-9, vol xx, pxix; quoted in Cullen, 1975, p10.

13 Foucault, 1979b, p17.

14 Cf on this question Tribe, op cit, ch 6.

15 Ibid, p111.

16 For a useful discussion of these issues, see Procacci, 1978.

17 Colquhoun, 1806,pp7-8 . Cf also Bentham, 1843, Smith, [1776] 1976; Ricardo, [1817] 1957-73.

18 Colquhoun, 1806, p82. Cf Procacci, op cit.

19 On the Old Poor Law see Marshall, 1968 and Poynter, 1969.

20 For criticisms of the Poor Laws see Malthus, [1798] 1976, p97; Smith, op cit, p470; Ricardo, op cit, p108. For the Poor Law Report see Poor Law Commission, 1834. For criticisms see especially Blaug, 1963 and Blaug, 1964; these are critically discussed in Williams, 1981, part 1, as are other contemporary historical discussions of the Poor Laws. Coats, 1960, is useful on economic thought and Poor Law policy.

21 Poor Law Commision, op cit, p127. On the New Poor Law more generally, see Rose 1972 and Fraser, 1976.

22 Hobsbawm, 1969, p233.

23 Dicey, 1905, p305.

24 The key text here is Gareth Stedman Jones' study Outcast London. This text however utilises a theoretical approach contested in the present study, regarding the theory of urban degeneracy as an ideology which diverted attention from the real nature of poverty in the nineteenth century, which Jones' re-analysis of statistical data purports to demonstrate. See Jones, 1976 and the criticisms in Williams, 1972 and Tomlinson, 1981.

25 For a discussion of the medicine of epidemics 3ee Foucault, [1963] 1972; Rosen,1953a; Rosen, 1953b; Briggs, 1961; Flynn's introduction to Chadwick, [1842] 1965.

26 Dyos, 1957; quoted in Jones 1976, p161.

27 On Chadwick and social hygiene see Chadwick, [1842] 1965; Lewis, 1952. On the role of Farr, see Eyler 1973a, Eyler, 1973b, Eylar, 1979. More generally, see Frazer, 1950; Hodgkinson, 1967; Hodgkinson, 1968. We return to this issue in Chapter 9 below.

28 Jones, op cit, Chs 9 and 10.

29 Cf Harris, 1972.

30 On the work of the Statistical Society, see Abrams, 1968 and Hilts, 1973.

31 Mayhew, 1861-62. See the discussions of Mayhew in Jones, op cit; and Williams, 1981, Ch 5.

32 On relief work and the debates over charity in the last half of the nineteenth century see Young and Ashton, 1956; Woodroofe, 1962; De Scheinwitz, 1947 and Gilbert, 1966.

33 Booth, 1892-7, vol 1, pp 28-62.

34 Ibid, pp 172-178. Cf Jones, op cit, Ch.6.

35 Ibid, pp156-171.

36 White, 1886; Llewellyn-Smith in Booth, 1892-7, Vol 3; Marshall,1890; cf the discussion in Jones, op cit. The question of 'alien immigration', which was central to the American debates, was raised in England largely in this context and in relation to the problem of 'sweated labour'. The argument centered around Jewish immigration and was posed differently than in America - it was precisely the superiority of the Jewish intellect, its cynical and calculating nature, the willingness of the Jew to work long hours for little pay and hence displace or drag down native workers that provided the justification for the limiting of rights of entry in the Aliens Act of 1905. See Hobson, 1892, p59ff; White, 1892; Russell, 1900; Royal Commission on Alien Immigration, 1903, and the discussions in Gartner, 1960; Gainer, 1972 and C. Jones, 1977.

37 Marshall, 1890, pp253-54.

38 Op·cit, Vol 1, pp43-44.

39 Cf Barnett and Barnett, 1909; Alden, 1905; Kelly, 1907; and the discussion in Harris, op cit.

40 Beveridge, 1905, p326.

41 Ibid, p327. See also Booth, 1892 and the discussion in Harris op cit, Ch 1.

42 See Booth, 1892. Cf Brown, 1968.

43 White, 1806, pp 28-29; cf Gareth Stedman Jones, op cit, Ch 16.

44 Foucault, [1976] 1979a, p118.

45 Bucknill and Tuke, 1858, p342. Passage italicised in original.

46 For a clear recent statement, see the account in Smith, 1981, Ch 3. Cf. Spurzheim, 1817; Gall, 1835; Combe, 1831; Carpenter, 1842. There is an extensive secondary literature on this period. In relation to Britain see, for example, Young, 1970; Cantor and Shapin, 1975; Cooter, 1981. A different approach analyses this shift in terms of the 'medicalisation' thesis which reduces these theoretical conditions to rationales for doctors monopolising madness. See especially Scull, 1979. This thesis is contested in Chapter One above.

47 Jacob, 1979, p149. Jacob is also a valuable source on the organisation of biological discourse in this period, as is Foucault's Order of Things [1966] 1970, especially Chs 5 and 8.

48 Rosenberg, 1974. Cf also Provine,1971 and Ludmerer,1972.

49 Cf Jacob, 1974, Ch 3.

50 Lucas, 1847-50; Moreau,1830 ; Morel, 1857. This account follows Ackernecht, 1969 which depends upon Genil-Perrin, 1913.

51 Burrows, 1828, especially pp100-103.

52 Bucknill and Tuke, 1858, esp Ch 8.

53 Duncan and Millard, 1866.

54 For a good discussion of these issues, see Smith, 1981; for the equivalent controversy in France, see Foucault, ed, 1978b.

55 Magnan, 1876.

56 Ellenberger, 1970, p281.

57 This is clear in all his writings. See, for example, Maudsley, 1873.

58 Maudsley, 1874, p46.

CHAPTER FIVE

HEREDITY VERSUS ENVIRONMENT

> In the earlier stages of civilisation natural selection and competition caused those who were strongest and most vigorous to leave the largest progeny behind them. It is to this cause, more than any other, that the progress of human life, as of all other forms of life, is largely due ... [But] there are increasing reasons for fearing, that while the progress of medical science and sanitation are saving from death a continually increasing number of the children of those who are feeble physically and mentally, those who are strong are tending to defer their marriages and in other ways to limit the number of children whom they leave behind ... Considering the causes that determine the supply of vigour, we must affirm with Mr. Galton that if the doctrine were to be acted on generally by the upper part of the nation including the great body of the more intelligent and capable artisans, but not the lowest classes, it would cause the race to decay.
>
> Alfred Marshall, 1890[1]

The eugenic strategy in which a psychology of the individual, and a specifically psychological conception of individual pathology, took shape at the end of the nineteenth century entailed a transformation in the conception of population which operated in both social and medical theories of degeneration. This transformation enabled a new systematisation of the linkage between the capacities of individuals and the quality and fate of populations. Such an inflection of

arguments concerning degeneracy was made possible by a reformulation of conceptions of population, variation and norm, a reformulation which the writings of Francis Galton demonstrate most clearly. It is thus no accident of biography or career, or idiosyncracy of political belief, that enabled Galton to provide the grounding for the socio-political strategy of eugenics. Let us turn to examine his texts.

Population and norm

> Eugenics is the science of improving stock, which is by no means confined to judicious mating, but which, especially in the case of man, takes cognisance of all influences that tend in however remote a degree to give the more suitable races or strains of blood a better chance of prevailing speedily over the less suitable than they otherwise would have had.
>
> Francis Galton, 1883[2]

Galton made no secret of the implications of his study of the family trees of four hundred eminent men when his Hereditary Genius was first published in 1869. By the time of its second edition, in 1892, the programmatic aspirations of the text were absolutely explicit:[3]

> the improvement of the natural gifts of future generations of the human race is largely, though indirectly, under our control. We may not be able to originate, but we can guide. The processes of evolution are in constant and spontaneous activity, some pushing towards the bad, some towards the good. Our part is to watch for opportunities to intervene by checking the former and giving free play to the latter... It is earnestly hoped that inquiries will be increasingly directed into historical facts, with a view of estimating the possible effects of reasonable political action in the future, in gradually raising the present miserably low standard of the human race to

one in which the Utopias in the dreamland of philanthropists may become practical possibilities.

What Darwin revealed of the blind forces that guided the evolution of man from the ape need not be a sign of despair or resignation in the face of the inexorable laws of nature - on the contrary, in recognising these laws we could become their masters. It was in this vein, for instance, that Galton opened his Inquiries into Human Faculty and its Development:[4]

> My general object has been to take note of the varied hereditary faculties of different men, and of the great differences in different families and races, to learn how far history may have shown the practicability of supplanting inefficient human stock by better strains, and to consider whether it might not be our duty to do so by such efforts as may be reasonable, thus exerting ourself to further the ends of evolution more rapidly and with less distress than if events were left to their own course.

The possibility of directing evolution by means of scientific knowledge lay in Darwin's reformulation of the relations between individual variation, inter-generational transmission and the characteristics of populations. This linked the hereditary transmission of variable characteristics, the laws of variation within a population and the effects of selective reproductive advantage. It was this combination which gave a new political salience to the question of individual differences, and allowed the reintegration of existing conceptions of pathological individuals into a systematic account of the nature and importance of the distribution of varieties and degrees of pathology within the population. The darwinian theory of evolution established the

theoretical centrality of reproduction upon which eugenics was to depend for its politics. It allowed Galton to reformulate the hereditarian theory which underpinned degeneracy arguments. There was now no need to propose the inheritance of acquired characteristics, with the indeterminacy which it introduced, in order to give a political pertinence to the inheritance of constitution. This is because, for Galton, what degenerated was not individuals or family lines but the population as a whole. Social danger was no longer conceived in terms of the progressive degeneration of a lineage. Such degeneration was idiosyncratic and variable; it led to the extinction of that line, and hence the elimination of the social danger it posed, without the necessity of administrative intervention. From Galton onwards it was rather the quality of the population as a whole which was threatened by the reproduction of those with defective constitutions. The individual degenerate now achieved his or her social and political significance from the point of view of the population of individuals with varying characteristics of which they formed a part. This enabled Galton to argue for the threat posed by individuals, without being concerned with the effects of life history upon that which is passed to progeny, for the degeneration of a population could occur simply as a consequence of the inheritance of constitution and the differential reproductive rates correlated with different constitutions.

Eugenics operated with a conception of the population which was statistical in both its original and its modern senses. Francois Jacob has pointed out that:[5]

> Even though Darwin did not use statistical analysis, he has a statistical conception of populations. Firstly, because variations only express the fluctuations of distributions

> inherent in every system; secondly, because selection acts only by slowly altering population equilibria through the random interaction of individuals and their environment.

Galton's arguments depended upon the possibility of analysing the evolution of populations in terms of the laws governing large numbers. Central terms of these analyses were those of population and norm. Population was a bounded field within which a multiplicity of individual elements were regulated according to a law which was neither biological nor cultural but mathematical. Thus Galton wrote "The science of heredity is concerned with fraternities and large Populations rather than with individuals, and must treat them as units."[6] The possibility of grasping the characteristics of such a population was provided by the concept of norm. Norm was that central point which, in virtue of the probability of deviations from it and their magnitude, allowed the statistical conceptualisation of populations in terms of the regular distribution of variations. The concept of the norm thus made possible the formulation of the law of frequency of error, of which Galton wrote "I know of scarcely anything so apt to impress the imagination as the wonderful form of cosmic order expressed by the 'Law of Frequency of Error'... The huger the mob and the greater the apparent anarchy, the more perfect its sway."[7] Let me examine each of these terms in a little more detail.

Population

> The most radical transformation of the biological attitude wrought by Darwin was to focus attention, not on the individual organisms, but on large populations.[8]

Both Darwin and Wallace attribute their conception of population to Malthus's 1798 Essay on the Principle of Population, yet it is well

known that the implications which they drew from it radically transformed the Malthusian schema. The model which Malthus proposed depended upon an opposition between the growth of a population and the limits of the environment. The population was a unitary object for Malthus, located upon a geographical terrain which imposes environmental constraints as a conservative force - Malthus having written the Essay partly against Godwin and Condorcet and the philosophers of progress.[9] The characteristics of the population did not form a central object of concern for Malthus; hence his weakness in Galton's eyes was precisely his failure to take account of the effects of population limitation upon variation and selection of characteristics across generations.[10] It is this question which became crucial in the writings of Darwin and Wallace. They introduced the conception of a systematic relationship between particular environmental limits and species characteristics. Hence speciation and change became possible, given only the possibility of variations which conferred selective reproductive advantage upon their bearers, and the conservation of these variations in the offspring through some unspecified mechanism of inheritance. Three points concerning this new conception of population are relevant for our analysis.

Firstly, the new notion of species:[11]

> I look at the term species, as one arbitrarily given for the sake of convenience to a set of individuals closely resembling each other...

In the classical morphology of Cuvier, species were a fixed type, defined according to a given and invariable set of characteristics. Within such a fixed classification, in which both the nature of, and the relations between species were established once and for all,

variations between individuals of the same species had no pertinence; they were either 'nothing' or were accorded only the status of defects. After Darwin, species were constituted not in the resemblances of individuals to an invariable type, but in terms of the organic relations which existed between individuals within a population. A species, for Darwin, was a differentiated unity of interbreeding individuals. This population of individuals was no longer merely an expression, more or less perfect, of an essential type; its characteristics were nothing over and above the sum of its individual parts. The transformations which might occur in populations and species were thus intelligible within the same set of concepts as those used to characterise the population itself in its stability - they required no invocation of special processes or events. Differentiation was now merely the extended product of internal variability, fixed not a priori but in space and time. Within this mode of conceptualisation therefore, Darwin had established the possibility of a systematic relationship between population, variation and individualisation.

Secondly, and following on from this, a new pertinence was accorded to the constraints of environment in relation to these variations amongst individuals in a population. Variations conferred upon individuals different degrees of 'fitness' for particular environmental conditions, and these had consequences in terms of the survival and reproductive abilities of those individuals:[12]

> as more individuals are produced than can possibly survive, there must in every case be a struggle for existence, either one individual with another of the same species, or with the individuals of another species, or with the physical conditions of life. It is the doctrine of Malthus applied with manifold

force to the whole animal and vegetable kingdom...

Darwin's definition of species established a conceptual space where the boundaries of population were determined functionally, and within which that population was necessarily internally differentiated. Populations were under constant pressure of competition for survival and for reproduction - the survival of a species over time depended upon its ability to maintain an adequate rate of reproduction in the conditions which obtained, and those conditions included other species with which it was in competition. But, additionally, the characteristics of the species which did survive depended upon the differential reproductive success of its different members and the particular combination of variable characteristics which they manifested and passed to their offspring.

Two important issues were thus opened up for investigation, which concerned processes whose actions were simultaneous and complementary. On the one hand, there were the effects of variation internal to a population upon the characteristics of the population as a whole in future generations. On the other hand, there were the consequences of the make-up of the population upon its external relations with those other populations with which it came into competition. Population thus came to signify an organic unity of constituent individuals each of which contributed to the average characteristics of the whole, and the mean around which it varied. Population was not merely the sum of its parts but the effect of the differential nature and relations of its members. Not a type and its realisations but a unity of differentiated individuals.

Thus a new significance was given to the individual within this conception of the population:[13]

> individual differences are highly important for us, as they afford materials for natural selection to accumulate...

The new biological attention which Darwin focused upon the population, far from eliminating the question of the individual from the domain of evolutionary theory, precisely created the individual in its variability as a salient object for such a theory. The relationship between populations and individuals was an integral one - variation only happened in individuals, it had evolutionary effects only through populations: individual variation thus achieved its importance from the point of view of the population. Darwin's conception of normal and inevitable small variations between individuals entailed a notion of the grouping of such variations around a population average - it was the location of this average which was shifted by the differential reproductive advantages which variation might produce. The relation between individual variation and population averages allowed the possibility of an evolutionary schema being constructed in terms of population statistics; it was precisely upon this possibility that Galton's eugenic strategy would operate.

Norm

> The whole theory of evolution is based on the laws of large numbers.[14]

It was in his Inquiries into Human Faculty that Galton began to construct the alliance between individual variation and population characteristics that provided the possibility for a rigorous systematisation of a theory of the distribution of human abilities. "The object of statistical science", he wrote, "is to discover methods of condensing information concerning large groups of allied facts into brief and compendious expressions suitable for discussion. The possibility of doing this is based on the constancy and

continuity with which objects of the same species vary".[15] If we were to be able to exercise control over the apparently random, yet evolutionarily crucial, processes of individual variation within a species, we had first to be able to grasp them, to conceptualise them in order to be able to operate upon them. Fortunately, since the time of Quetelet, it had been known that certain statistical propositions could bring variability within the grasp of scientific laws. And, Galton argued, the laws of chance applied to variability both outside and within the human sphere.[16] It is these laws which Galton proposed to develop and adapt to the purposes of analysis of evolution.

For Galton, the conception of species which Darwin developed shared the same properties as other species. "A species may be defined as a group of objects whose individual differences are wholly due to different combinations of the same set of minute causes, no one of which is so powerful to be able by itself to make any sensible difference in the result".[17] We see here, incidentally, that it was Galton's statistics rather than his biology or his desire to remain loyal to Darwin that produced his allegiance, and that of his followers, to biometrics rather than Mendelianism. Within any species, whilst variations for any individual may be random, the incidence of variation in a population is systematic, and may be plotted as a smooth curve - the ogive, or 'normal curve'. Thus chance becomes adequate to knowledge, amenable to the formulation of a scientific law:[18]

> We can lay down the ogive of any quality, physical or mental, whenever we are capable of judging which of any two members of the group we are engaged upon has the larger amount of that quality... There is no bodily or mental attribute of any race of individuals that cannot be so dealt with, whether our judgment

in comparing them be guided by common-sense observation or by actual measurement, which cannot be gripped and consolidated into an ogive with a smooth outline, and thence forward be treated in discussion as a single object.

If this thesis of continuity and regularity delivered up the variable object of population to the regularity of scientific knowledge, it was the norm - the average amount of a quality - which allowed the formulation of the laws of this variation, and hence the organisation of all the features of human ability within a single conceptual space. For the relationship between average and deviation was the foundation of the theory of normal distribution and the basis of the power of the normal curve:[19]

> An average is but a solitary fact, whereas if a single other fact be added to it, an entire Normal Scheme, which nearly corresponds to the observed one, starts potentially into existence.

It is this normal curve which would provide eugenic discourse with one of the crucial theoretical conditions of possibility for its strategy, and which would be central for the emergence of a science of mental measurement. It was the norm which allowed that 'gripping' of the population in thought which Galton desired, and hence the formulation of a systematic relationship between the four terms - population, norm, individual, deviation - which regulated the theoretical field of eugenics. From its inception this argument derived norms of psychological functioning not from an investigation of its object - the human mind and its laws of functioning - but from a question of differrentiation - the measuring of degrees of variation. And variation, like normativity itself, was conceived not in psychological but in statistical terms - or rather, the terms of

psychological analysis of variation in populations were derived from statistical principles concerning the laws of variation in large numbers. The psychology of the individual was formed through this linkage between norms of different orders, but, as we shall see, such a mode of conceptualisation inscribed the limits of such a psychology at the very heart of its conceptual system

This conceptual structure enabled a reformulation of both the social and the psychological theories of degeneracy, within a strategy in which the question of individual constitution was linked to that of social worth and the consequences of differential reproduction. Not so much a new question, as a new way of posing the question of degeneracy.

Genealogy

If Galton could regard his statistical discoveries as having programmatic consequences, this was because they were immediately deployed within a field of social analysis whose organisation predated them, and with which we are already familiar: that of ability and nobility, of ancestry and lineage, of stock and constitution. In the third chapter of Hereditary Genius Galton was perfectly clear concerning his objective: to produce a classification of individuals in terms of their differential possession of intellectual capacity. Having considered briefly such varied evidence as the attainment of mathematical honours at Cambridge, the memory of Lord Macauley and Seguin's experience with idiots, he concluded:[20]

> The range of powers between - I will not say the highest Caucasian and the lowest savage - but between the greatest and least of English intellects, is enormous. There is a continuity of natural ability reaching from one knows not what height and

descending to one can hardly say what depth. I propose in this chapter to range men according to their natural abilities, putting them into classes separated by equal degrees of merit, and to show the relative number of individuals included in the several classes. Perhaps some person may be inclined to make an offhand guess that the number of men included in the several classes would be pretty equal. If he thinks so, I can assure him he is most egregiously mistaken.

The method I shall employ for discovering all this is an application of the very curious theoretical law of 'deviation from the average'.

Not between two populations, but within a single population there were huge differences in the degree to which individuals possessed intellectual ability - the majority falling into the classes near to the norm, fewer and fewer into the classes further from this average, both above it and below it. In other words, intellectual ability was distributed according to the laws of the normal scheme and could be analysed in terms of its statistical principles. Now this observation may well be "a fact calculated to considerably enlarge our ideas of the enormous differences of intellectual ability between man and man", but its consequences appear somewhat more limited than Galton's grandiose introduction might have led us to expect.[21] However, in two further operations the possibility would be established for this 'fact' to be inserted at the very heart of contemporary debate on the 'social question' - first the rigorous formulation of the relation between ability and heredity, and the second the unification of ability as both the expression of a biological origin and the clearest index of social worth.

The principal task of Hereditary Genius was to show that the

distribution and inheritance of intellectual ability followed the same laws as any other continuously varying ability - intellectual ability was transmitted and distributed according to the law of ancestral heredity. This law was Galton's formulation in mathematical terms of the darwinian thesis of continuous variation and blending inheritance.[22] For Darwin and Galton, as we have seen, a population was a group of interbreeding individuals whose characteristics varied by small degrees; the character of any offspring was a result of the blending of the characters of its parents. Galton demonstrated, on the basis of these premises, that a child would receive one half of its nature from the parental generation, one quarter from the grandparents and so on, the contribution of each generation decreasing in geometric ratio.[22] Continuous variation and blending of inheritance were, for Galton, necessary if the nature and effects of inheritance were to be graspable through statistics. And the law of ancestral heredity was to define the opposition between biometricians and Mendelians in the first decade of the twentieth century. Pearson, who mathematically refined the law, regarded it as one of equivalent status to those formulated by Newton:[23]

> If Darwinian evolution be natural selection combined with heredity, then the law must prove almost as epoch making to the biologist as the law of gravitation to the astronomer.

But despite Pearson's acrimonious opposition to the Mendelians, the law, for him, was purely mathematical - as a positivist Pearson refused to refer it to any ontological foundation. But Galton, despite some equivocation, did provide such an ontological status for the law, a grounding in a biological notion of 'stock'.

Galton had used the term 'stirp' for his earliest conception of a reproductively transmitted biological stock which was expressed in

all the characteristics of the individual and which remained unaffected by environmental influences during the life of the organism. Darwin, in common with the hereditary theories we have already examined, did not rule out 'Lamarck' type' explanations of the effects of use and disuse and on the inheritance of acquired characteristics, despite the fact that he accorded the major source of variation to the combinations effected during the process of reproduction. Indeed, as the evidence against the theory of natural selection mounted, Darwin attributed a greater role to such influences, and his particulate theory of pangenesis expressly allowed for them through the transmission of somatic information via particles to the germ cells.[24]

Galton also advocated a particulate form of inheritance, but argued that the particles were laid down in the ovum immediately after fertilisation, and were thus unaffected by circumstances that befell the organism during its life.[25] However in another respect Galton remained much closer to prevailing theories than Darwin. Where Darwin was concerned with the inheritance of discrete characteristics, Galton was concerned with the inheritance of stock - a term allied to the familiar notion of constitution. Stock - familiar to both breeders of horses and readers of Debretts - referred not to this or that characteristic, but to the general quality of a particular line of descent. Thus Galton, by forging a linkage between stock, ancestral heredity and the normal distribution of intellectual abilities, effected a kind of transformation of quality into quantity.

In this transformation, the quantity of intellectual ability was both expression and index of the quality of all the faculties, both mental and physical, the surest sign of the state of

constitution, indeed the measure of vital energy itself:[26]

> Energy is the capacity for labour. It is consistent with all the robust virtues, and makes a large practice of them possible. It is the measure of fullness of life; the more energy, the more abundance of it; no energy at all is death; idiots are feeble and listless... Energy is an attribute of the higher races, being favoured beyond all other qualities by natural selection... In any scheme of eugenics, energy is the most important quality to favour; it is, as we have seen, the basis of living action, and it is eminently transmissible.

Thus good stock was allied with vigour, and became the principle object of both natural and artificial selection. It is at this point that we can see the link back with the question of degeneracy as we have already analysed it - one which concerned the flourishing in the heart of our great cities of individuals of degenerate stock, whose conducts, habits and abilities all manifested that weakness of vital energy which was the sure sign of a degenerate constitution:[27]

> It cannot be doubted that town life is harmful to the town population... The proportion of weakly and misshapen individuals is not to be estimated by those whom we meet on the streets. We should parade before our mind's eye the inmates of the lunatic, idiot and pauper asylums, the prisoners and patients in hospitals, the sufferers at home, the crippled, and the congenitally blind...

For Galton too these wretched figures - lunatics, paupers, idiots, criminals, the sick - form a unified group in that their different conditions are merely variant forms of expression of a common cause - a degenerate constitution:[28]

> It is perfectly distressing to me to witness the draggled, drudged, mean look of the mass of individuals, especially of the women, that one meets in the streets of London and other purely English towns. The conditions of their life seem too hard for their constitution, and to be crushing them into degeneracy.

But despite the implications of Galton's formulation in these quotes, the strategy which eugenics proposed in relation to degeneracy was neither that indicated by the analysis which saw degeneracy as acquired through the conditions of urban existence, nor that which saw it as the consequence of the cumulative deterioration of constitution down a line of descent. It shared with the older formulations the notion of degeneracy in terms of a single constitutional essence, differentially expressed, transmissible across generations. But it located this within a rigorous conception of population, and its central shift was the reformulation of the role of reproduction. What degenerated for Galton was not so much an individual or a line, but a population, in terms of the capacities of the individuals who made it up and their distribution around a norm. And what was thus the cause of alarm was the differential reproductive success of individuals with different capacities, different quality of stock. Eugenic politics would operate on the insight so lucidly expressed by Arnold White in 1886:[29]

> Criminals and pauperised classes with low cerebral development renew their race more rapidly than those of higher nervous natures. Statesmen stand idly by... Dynasties of criminals and paupers hand down from generation to generation hereditary unfitness for the arts of progress and all that brings greatness to a nation, and engage themselves in a warring against all forms of moral order...

It is at this point that the strategic link between a certain practice of social administration and a certain conception of human abilities became possible. Galton's Huxley Lecture to the Anthropological Institute, delivered in October 1901, will provide us with a model for the systematic relationship between notions of population, variation and norm, conceptions of human heredity and the problem of urban degeneracy which constituted the eugenic strategy.[30]

Recall the way in which Charles Booth distributed the population into classes. Galton began his lecture by suggesting that this distribution, and the numbers in each class, followed precisely the pattern which would be predicted by the Normal Law of Frequency. He then demonstrated that by ordering these findings around the norm and applying the law of probable error, what he termed 'civic worth' could be seen to conform to the distribution expected of any other inherited trait. 'Civic worth' could thus be seen to be a further way in which an hereditable stock or constitution expressed itself, and so the inheritance of such a trait could be understood in terms of the theory of blending inheritance and the law of ancestral heredity. Once the situation was thus clarified, the appropriate conclusions became self-evident.

The improvement of human stock, in terms of civic worth, was possible, because the laws according to which it was distributed in the population and inherited across generations were understood. Conscious control must therefore be directed, first of all, to improving and encouraging the rate of breeding of the best stock, through the award of diplomas of civic worth entitling the holders to special privileges, through patronage by noble families, through provision of cheap houses and so forth. For "The possibility of improving the race of a nation depends on the power of increasing the

productivity of the best stock".[31] But it was not only measures of this kind, 'positive eugenics', that were called for; so too was 'negative eugenics' to prevent the breeding of the lowest classes - Booth's classes A and B:[32]

> Many who are familiar with the habits of these people do not hesitate to say that it would be an economy and a great benefit to the country if all habitual criminals were resolutely segregated under merciful surveillance and peremptorily denied opportunities for producing offspring. It would abolish a source of suffering and misery to a future generation, and would cause no suffering in this.

The relation between population, variation and norm thus allowed Galton to link heredity and degeneracy in a rigorous statistical relationship, mapping a distribution formed through an alliance between economics and morality onto a distribution constructed according to the natural laws of large numbers. It is thus not surprising that Galton, in 1907, was able to deliver a lecture entitled "Probability, the foundation of eugenics" in which the first half was devoted to a calculation of the degrees of mischief which were associated with classes of persons afflicted with specific degrees of degeneracy, in order to examine the justification for taking drastic action against their propagation; the second half to an exposition of the means of statistical computation of variability, medians, standard deviations, binomial series, indices of correlation and normal curves.[33] For the eugenicist strategy depended upon the use of the terms of population, norm, deviation and distribution, as a kind of relay between a theory of population statistics and a practice of population regulation. At one and the same time, eugenics elaborated a theory of population variation, a

means of its calculation and a programme for the utilisation of this knowledge within a systematic technology of social administration. Thus Galton was able to conclude his Huxley Lecture with the confidence of a man who has grasped at last the key to a political arithmetic:[34]

> The faculties of future generations will be distributed according to the laws of heredity, whose statistical effects are no longer vague, for they are measured and expressed in formulae. We cannot doubt the existence of a great power ready to hand and capable of being directed with vast benefit as soon as we shall have learnt to understand and apply it.

Galton's eugenic programme was, of course, merely an ideal schema, and one that, to all accounts, was ill-received for some three decades after its initial formulation.[35] Despite its homology with the contemporary concern with urban degeneration it might have remained merely an idiosyncratic diversion were it not for a displacement in the formation of the social question which was, for perhaps two decades, to bring to the fore the questions of efficiency and deficiency, to focus social concern upon the dangers posed to society by mental deficiency and to allow the formation of the discourse of individual psychology around the question of mental measurement. It is to these questions that we will now turn.

Efficiency and deficiency

Social historians agree that eugenics took off as a political doctrine in the first decade of the twentieth century. Its terminology was utilised in the formulation of political arguments on a range of issues and from a variety of political positions; it was

given an institutional form in the emergence of societies; journals and research laboratories; many leading politicians and intellectuals, especially radicals and socialists, were associated with eugenics in various capacities.[36] There has indeed in the secondary literature been a tendency to overestimate the degree of unity which this eugenic language implied, to succumb to the fascination of the rhetoric and the proliferation of the texts, and to find it difficult to explain the limited impact which the 'eugenics movement' had on the policies of government during this period. As we have already seen, the tendency of much of this analysis has been to scrutinise the backgrounds of those involved, in order to reveal behind their beliefs and statements the cognitive interests which motivated them and the social interests which lay behind them.[37] Our concern in the present study is rather different - it is not with eugenics per se but with the social and theoretical conditions which made the eugenic strategy both possible and significant. The way 'the social problem' was constructed allowed the contestation between this eugenic strategy and others, in respect both to this problem and to the consequences thereof. Of particular importance was the way in which the issue of differential rates of reproduction among different sections of the population came to be posed; the way in which this was the occasion for the collection and analysis of statistics as to rates of reproduction and the rival interpretations of this evidence; the way in which this was linked to the prioritising of a set of questions concerning the consequence of differential rates of reproduction for the health and well being of the population. For it was in this configuration that the problem which we shall address in the next chapter took shape - the problem of mental deficiency around which individual psychology is formed.

Let me begin by returning again to the question of population,

or rather to the way in which a conception of population figures in political argument. We have already seen that 'population' can become an object of political concern and governmental policy in a number of distinct ways, and with different consequences. In debates over questions of population in the seventeenth and eighteenth centuries, the central point at issue concerned the link bewen the size of the population and the wealth and power of the state.[38] In the seventeenth century, the principal theme was that the state should be concerned about the size of the population, and encourage growth in numbers which would inevitably increase its wealth. Thus Child wrote that "whatever leads to the depopulating of a country leads to the impoverishment of it", and that "most nations in the civilised parts of the world are more or less rich or poor according to the paucity or plenty of their people, and not the sterility or fruitfulness of their land".[39] It was this link between population and wealth which placed demography at the heart of the political arithmetic of Graunt, Petty, Davenant and King.[40] In the eighteenth century the question began to be posed as to whether a limit existed beyond which further increases in the size of the population would create misery. Thus Turgot argued that a point was reached where "the employer, since he always has his choice of a great number of working men, will choose that one who will work most cheaply", with the result that "the wages of the worker are limited to that which is necessary to procure his subsistence".[41] And Malthus, as has been discussed, posed the question in a similar way when he formulated the principle of natural limits in terms of the contradiction between a geometrical increase in population size and an arithmetical increase in food supply.[42]

At the turn of the nineteenth and twentieth centuries, the

reformulations which we have discussed in previous sections of this chapter stabilised into a transformed mode of conceptualising the problem of population. Where the old problematic of population had as its object the maintenance of a certain equilibrium in the relations between states, in the debates which we are discussing a link was forged between population and competition between states, in terms of the dynamic changes in these relations. And secondly, as has already been shown, whilst the old problematic concerned population as a homogeneity, we now see questions emerging concerning the variability of the population and the consequences of this. Thus the problem of population was reformulated in terms which constructed a different connection between external relations between states and the internal organisation of states. In the discourse of 'imperialism' this connection was posed in a darwinian vocabulary, although the use of terms such as 'struggle for existence' and 'survival of the fittest' was within a conceptual schema and form of argument which owed little to the theory of natural selection. Fitness was utilised as a single category or dimension, allowing the envisaging of something like a linear scale upon which nations and individuals might be ranked, and the term in which fitness was conceived was that of <u>efficiency</u>.

A recent study of this period by Searle has argued that a single term structured a field of debate on diverse questions of government, industry, social organisation and individual welfare: the term <u>efficiency</u>.[43] Whilst Searle's account suffers on account of his tendency to treat efficiency in a unitary fashion, it is possible to accept the prevalence of the term in political argument without such a commitment to the singularity of its presence or pertinence. Efficiency should be seen not as a category of explanation imposed from outside, as a hidden principle governing many discourses nor as

a single concept utilised in many domains in a consistent manner. It functioned in rather a different way. It conferred a kind of regularity on the discourses of this period not because of the coherence of its meaning but precisely because of the variability which it permitted. Its ability to function metaphorically in a range of distinct formulations served as a principle of integration at the same time as its diverse significations permitted the organisation of controversy. In the present context what is pertinent to draw out is the sense in which efficiency can be seen as indexing a particular reformulation of concern with the population.

Those who advocated a policy of imperialism, from polemicists like White, through eugenicists like Pearson, to Fabians like Shaw and Tariff Reformers like Chamberlain, tended to write of the major form of international conflict in terms of a struggle between a number of great states.[44] This was a struggle for survival, a dynamic process of competition for scarce resources, in which the fittest would survive and the weakest would go to the wall. The use of the darwinian terminology covers considerable conceptual and political dispute between these positions. But the point which I wish to make here is that this mode of argument occurred not simply in the field of speculative political philosophy, as, say, in the writings of Spencer, but as a functioning element in the forms of political calculation engaged in by political organisations and social forces.[45] In this type of argument a crucial relation was forged between success in the imperialist struggle abroad and continuing and expanding prosperity at home. This was so in Lenin's analysis of the connection between imperialism and the corruption of sections of the working class; it was true of the writings of the Austro-Marxists like Renner and Hilferding; it was true too of

Chamberlain's speeches throughout England on the question of tariff reform.[46] Imperialism was conceived in terms which are already familiar to us from our earlier discussion: a double relation articulated upon the nation, which was a bounded entity with a certain character engaged in an external struggle whose outcome was determined by its internal features.

Internal fitness determined the outcome of external competition; internal fitness was a matter of efficiency. Efficiency of individuals, efficiency of business, efficiency of the armed forces, efficiency of administration and government, efficiency of the nation as a whole. If Britain had declined as a world power, this could now be understood in terms of the relative inefficiency of her industrial and social arrangements, and of her population, in relation to her competitors. As Searle points out, the opposition between Britain and Germany played an important role in these debates. Britain's commitment to government by amateurs and gentlemen, its tradition of personal liberty, its leisurely forms of industrial organisation supported by decades of prosperity, had led to slackess and idleness in business, in the military, in the civil service, in the organisation of welfare. In Germany one had the efficiency of Bismarckian state socialism, the system of social insurance, the highly organised education system with its links with industry, the German model army and the German techniques for dealing with the 'social question'.[47]

But crucial for our purposes was a debate which concerned a different and direct competition between states and one in which the relative unfitness of Britain had been clearly demonstrated. The debacle of the British performance in the Boer war provided a prime example of the dependence of external success upon the internal efficiency of the nation. Arnold White's account was quite typical.

"Britain", he wrote, "has received a warning to reorganise her education, her system of Imperial Defence and the administration of her public affairs".[48] And in particular, for White as for many others, one fact stood out above the others from the events which produced this warning - the resulting revelations about the appalling physical status of the recruits:[49]

> In the Manchester district 11,000 men offered themselves for war service between the attack of hostilities in October 1899 and July 1900. Of this number 8,000 were found to be physically unfit to carry a rifle and stand the fatigue of discipline. Of the 3,000 who were accepted only 1,200 attained the moderate standard of the muscular power and chest measurement required by the military authorities. In other words, two out of every three men willing to bear arms in the Manchester district are virtually invalids.

Now this 'fact' had a range of possible significances depending upon the strategy within which it was deployed. For eugenicists, it was both the occasion for the insertion of eugenic arguments within a vociferous public debate, and the demonstration of the theses that they had long argued. Within this discourse, where the alliance between population, variation, heredity and degeneracy was already established, this 'fact' was further evidence of the deterioration of the national stock. It was not merely a problem of the physical state of large numbers of the population, but was indicative of everything else of which that state was an example and an index. The decline of national stock was a process which led to the flourishing of criminality, pauperism, alcoholism, prostitution, unemployability, lunacy - all those forms of conduct which were merely distinct

expressions of a common cause. And for eugenics, the origin of this decline had to be sought not in the environmental consequences of urban life, not in the transmission of acquired conditions by inheritance, but in the relative frequency of reproduction itself. Hence the attention lavished upon the question of the birth-rate.

All the major European states suffered a decline in their birth-rate in the last half of the nineteenth century. Calculations based upon census data revealed that Britain's decline had not only been greater than that of any other nation except France, but its recovery had also been slower. The shift in the relations between population size and national wellbeing, which has just been remarked upon, is demonstrated by the way in which the figures were set up and utilised. With few exceptions, the debate over the decline did not hark back to the theme of the link between population size and wealth, but centred upon the distribution of this decline within the population, its efects upon the make up of that population and the consequences of these effects. For, as the evidence was organised to reveal, this decline in the birth-rate was not evenly distributed across the population: whilst the birth-rate of the lower classes was remaining stable, that of the middle classes was reducing rapidly.

The causes adduced for this phenomenon are of interest in their own right. They were not merely the rise of feminism and the movement for women's emancipation, which was causing women of the middle classes to abandon their proper role as childbearers and homemakers. Nor simply the desire of women to enter employment nor the willingness of the well-off to put selfish interests and standard of living above their patriotic duty to bear children. There was also a whole medical discourse upon the deleterious effects of education upon female fertility, especially at the time of puberty, or during menstruation, when it diverted sorely needed bodily energy

to the mind and permanently reduced fecundity.[50]

However, more relevant for our purposes are the consequences which were argued to flow from such a differential reduction in birth-rate. The thesis that the transformation of a species was the consequence of differential reproductive advantage clearly could be applied to situations where this advantage accrued by other means than the natural selection of random variations. If those who limited their birth-rate were the well-off, the prudent, the thrifty, the educated, then it followed that the improvident, the poor, the ill-educated would effectively have a reproductive advantage. And if the characteristics of these two groups expressed the relative superiority or inferiority of an heritable stock, then the nature of the shift in the overall characteristics of the population would be obvious to anyone who took the trouble to think about it. Indeed Galton had already drawn attention to precisely this point when discussing the effects which would follow if Malthus' exhortation to limit population by delaying the age of marriage were acted upon. For Galton this would only exacerbate the danger already faced by the higher civilisations - that they tend to multiply from the lower and not the higher specimens of the race.[51]

But while in 1883 Galton's arguments had appeared idiosyncratic and his concerns were unheeded, in the political debates two decades later their salience was clear, and the evidence for their truth was not difficult to obtain. Karl Pearson, who had been arguing this position for over a decade, had regularly drawn attention to their pertinence in the opening years of the new century. Thus, for example, in 1904 he wrote:[52]

> We are ceasing as a nation to breed intelligence as we did fifty to a hundred years ago. The mentally better stock in the nation

is not reproducing itself at the same rate as it did of old; the less able, and the less energetic are more fertile than the better stocks. No scheme of wider or more thorough education will bring up, in the scale of intelligence, hereditary weakness to the level of hereditary strength. The only remedy, if one be possible at all, is to alter the relative fertility of the good and bad stocks in the community.

The linkage between stock, fertility, energy and intelligence was here being discussed by Pearson in an article in Biometrika, the house journal of the biometricians, who now had an institutional base in the Department of Applied Mathematics at University College, London, of which Pearson was Professor. Aided by funds from the Worshipful Company of Drapers, the Biometric Laboratory was engaged in carrying out research which would put these reflections on the differential birth- rate on an unequivocally scientific basis.[53]

David Heron, Pearson's research assistant, working from the Biometric Laboratory and utilising the techniques of correlational analysis recently developed by Pearson, was able to use census data in order to determine the degree to which the reduced fertility of English wives was associated with social status or social problems as indicated by district of residence. Heron's results, though expected, were nontheless alarming:[54]

As far as the present investigation goes it demonstrates I think conclusively that for the London districts there is a very close relationship between undesirable social status and a high birth rate... Nor is the higher birth rate of the undesirable elements compensated by the higher death rate... The relationship between inferior status and high birth rate has practically doubled during the last fifty years, and it is clear that in London at least the reduction in the size of families has begun at the

> wrong end of the social scale and is increasing in the wrong way. I have brought forward evidence enough to show that the birth rate of the abler and more capable stocks is decreasing relatively to the mentally and physically feebler stocks.

Thus research confirmed what theory had predicted - the lowest twenty-five percent of the adult stock was producing fifty percent of the next generation.

But not only was tainted and degenerate stock given reproductive advantage by the limitation of fertility by the more advanced and developed sections of the population, this advantage was further consolidated by the suspension of natural selection within the population itself. The familiar critique of charity and philanthropy - that it encouraged precisely that state of pauperism that it wished to eliminate - was reformulated in the eugenic strategy. Medical developments, hygienist schemes of sanitary improvement, indiscriminate handing out of doles and so forth, had suspended natural selection within the population and allowed the flourishing of a mass of carriers of weakened and tainted stock in the heart of the great cities. Feeble constitutions made them easy prey for such diseases as tuberculosis, scrofula and phthisis; low levels of morality made them prone to promiscuity, inebriety and all forms of criminality; they were unable or unwilling to engage in productive employment or even to carry arms for their country. A drag on Britain's commercial efficiency in peacetime, a threat to her survival in war, they dragged down the average fitness of the British race and put her at a disadvantage in the international struggle for survival where the law of natural selection still held sway. If charity and philanthropy had so changed the ethical views of the British people that they could not tolerate a return to the primitive

and natural forms which automatically eliminated the unfit, then this process must be taken under conscious and rational control. The pauper class must be prevented from reproducing their kind, by segregation or sterilisation; the good stock must be encouraged to breed. Only thus could the wholesale decline of the British race be prevented.[55]

Thus the spiral of urban degeneracy was redrawn in hereditary terms and the concept of unemployability re-organised around a notion of degenerate stock. This did not transform the crucial point of intervention, which remained between the employable and the unemployable. Nor did it transform the objective of intervention, which remained that of attaching the improvable to the social order and segregating the residuum. But what was crucial was the unravelling of the confused play of causes and effects which had characterised the nineteenth century writings on degeneracy. In the earlier discussions, as we have seen, degenerate character functioned as both cause and effect of the occupation of a particular milieu. Conditions of living were immediately ethical both in their nature and in their consequences, and there was thus no contradiction between the formulation of proposals for reform of milieu and the advocacy of detention colonies for unemployables. The modern opposition between hereditarianists and environmentalists cannot be utilised as a grid for the analysis of such strategies. But what one can see in the formalisation and spread of eugenics is the crystallisation of the strategic differentiation and contestation between those who deployed a form of explanation based upon heredity, and advocated a strategy of reproductive control based upon it, and those who, freed from the theme of the inheritance of acquired characteristics, produced arguments, explanations, and strategies of

social reform, which centred upon the environment, conceived in something like its modern form.

The eugenic strategy played a triple role in the questions which concern the present study. Firstly, as we shall see in the next chapter, it provided the conditions which allowed the question of mental deficiency, of feeble-mindedness, to take the form it did, and to offer to psychological discourse a particular object around which it would begin to regularise and institutionalise itself as a practice. Secondly it provided the forms of explanation within which the authors and agents who were the pioneers of individual psychology operated. Karl Pearson, Charles Spearman, Cyril Burt were all eugenicists, as were such leaders in the theory and practice concerning the mentally deficient as Alfred Tredgold and Ellen Pinsent. But it would be a mistake to regard this as an outcome of individual biographies, of prejudices or intentions or of class or sectional interests. It was rather the outcome of the mode of conceptualisation entailed within eugenics, which allowed the posing of a problem of mental efficiency and deficiency in a way which made individual psychology possible. And thirdly, the eugenic strategy was one of the protagonists in the struggles over shape, direction, objectives and mechanisms of social policy, within which the discourse and practice of individual psychology would be installed. But it is important to recognise that however prolific the eugenic texts, however fascinating in their naive rhetoric, the events which followed were in no way a realisation of the eugenic strategy.

Eugenics established the field of problems concerning the hereditary transmission of stock and human abilities as the domain for a psychology of the individual. At the same time, as we have seen, it freed the domain 'environment' - its nature, effects and reform - for

elaboration within an opposing strategy. This was a strategy of social hygiene which found its principal spokesmen in the doctors, and which utilised as evidence the results of a tradition of social investigation concerning the interaction of environment and health. Rowntree's survey Poverty had argued that the condition of the Boer War recruits at York, Leeds and Sheffield was the effect of the falling of their living standards below the minimum necessary to maintain physical efficiency.[56] To point to Rowntree's work in this respect is not to concur with the account provided in histories of sociology which, while condemming Booth for the admixture of morality and science in his investigations, hails Rowntree as the pioneer of objective social research.[57] Rowntree's early texts were just as 'moralistic' as Booth's, although this 'moralism' had a different point of insertion. For example, in the estimation of total poverty based on house-to-house visits, households were considered in poverty where the investigator was informed by neighbours that the father or mother was a heavy drinker, or where the appearance of the children or the home concurred with the investigator's conception of what a poor home looked like.[58] And additionally, Rowntree's use of the language of efficiency allowed the text regularly to link problems concerning physical fitness with all those other social problems of 'inefficiency' which I have already discussed.

Indeed, the point is that the social hygienist argument at this time could be deployed in relation to the very same problems as the eugenicist argument. Thus Rowntree, to keep to the same example, argued in 1914 for the same centrality of casual labour in the process of racial decline, the production of a class of incompetents who drag down wages, depress the standard of life and must be eliminated from the industrial field. And Rowntree concurred with eugenicists, and with the proposals of Booth and Beveridge, that

segregation in labour colonies was the only solution for adult unemployables.[59] But crucial is the way in which the problem of the production of unemployables was set up. Unemployables could be made from the evil influence of drink, gambling and so forth on those who had a fair start in life. They were also produced from the hopelessness and lack of respect engendered by the effects of an unwholesome environment upon children, or from inadequate nutrition, which led to ill-health and low physical efficiency. Thus the strategy proposed was one of preventative medical scrutiny and environmental reform.

It is hardly surprising, then, that the most enthusiastic spokesmen for this medicalising strategy should have been the doctors. In a leading article of 1903 the British Medical Journal demanded an enquiry into the physical deterioration of the population. Referring to Booth as well as to Rowntree they argued that if the stunting effects of work upon children were combined with lack of sunshine, outdoor exercise and fresh air, and if family earnings were insufficient for the maintenance of physical efficiency, it was "easily conceivable that the British race will deteriorate".[60] While the eugenicist strategy proposed segregation and sterilisation of those recalcitrant elements destined by their inherited constitution to pose a threat to a civilised and efficient social order, this medical strategy gave these operations only a limited tactical role. Prevention, in this strategy, took a different form. It depended upon environmental reform coupled with hygienic and medical education of parents, and the education and medical inspection of children. Appropriate norms of child rearing and nutritional standards were to be diffused into the home through an alliance between medicine and mothers, utilising the school as the

place where universal and compulsory medical screening, diagnosis and determination of appropriate forms of treatment could occur. If this neo-hygienist strategy is reminiscent of the earlier schemes of the social hygienists, it nonetheless differed from it in that the medicine involved is now one of the clinic rather than of epidemics, and because of the privileged role now assigned to the school-child-home linkage in its tactics.

The report of the Interdepartmental Committee on Physical Deterioration, set up under pressure to investigate this question of deterioration and its prevention, eschewed the eugenicist strategy and adopted instead the neo-hygienist model. Unfitness, it discovered, was not due to degenerate stock but to environmental conditions, lack of income, hygiene and education and hence of proper nourishment. Eliminate these and unfitness too would disappear.[61]

> There is... every reason to anticipate RAPID amelioration of physique so soon as improvement occurs in external conditions, particularly as regards food, clothing, over-crowding, cleanliness, drunkenness and the spread of common practical knowledge of home management.

This strategy involved the breaking down of the opaque masses of the poor into visible units, and action upon the efficiency of the population at the level of the household through its transformation into a technical machine for the rearing of healthy children. Such children would be clean, adequately clothed, fed according to medical norms and taught to exchew habits - excessive consumption of alchohol, sexual excess and promiscuity and so forth - which were now regarded as being not only morally undesirable but also damaging to health and constitution. The objective: to produce a population simultaneously physically, morally and mentally efficient. The

mechanism: the reform of individuals by means of the link between the home and the school and the relay of the child. The hitherto inaccessible corners of social life in the cities were to be opened up to sight and to reform through the institution of the school and the agency of the child.

Universal and compulsory education had the function both of revealing and of helping to resolve the problem of the appalling standards of physical and moral health of the population. Revealing it because, for the first time, all the children of the entire population were brought into contact with those who could recognise lack of physical and moral wellbeing when they saw it, and who saw it with alarming frequency. But also helping solve it because, through the school, it could be diagnosed and remedial measures put into operation.[62] As we shall see in a later chapter, this is precisely the point where the problem formed which was the occasion for the development of a technology of mental measurement and a psychological apparatus to administer it. And it was the opposition between the neo-hygienist strategy and the eugenic strategy which defined the first struggle within which individual psychology was engaged.

The eugenic and the neo-hygienist strategy appear to be in opposition. The former proposed segregation, the latter socialisation, the attachment back to the social order of those groupings who were marginal to society because they had escaped its norms. Eugenics appeared to operate in terms of a rigid policing of the boundary between those in society and those who threatened it; medicine operated by attempting to integrate the disaffected through education and the inculcation of norms. But this opposition was by no means an absolute one: not only could these strategies be combined into a single schema of administration, but such a schema illustrates exactly the key point at which an individual psychology was to try to

establish itself. For what became central were techniques of individuation and assessment which would enable a rational distribution of individuals amongst a variety of social institutions and practices specialised to deal with them according to their personal characteristics, problems and difficulties in order to produce the most efficient and productive population.

Nothing illustrates the ideal form of this combination of eugenics and neo-hygienist environmentalism more clearly than the programmes of the Fabians, in particular Sidney and Beatrice Webb. When Sidney Webb was asked to lecture to the Eugenics Society on the Minority Report which was submitted by the Royal Commission on the Poor Laws and the Relief of Distress in 1909, he outlined its policy in six points:[63]

> (1) Deliberately altering the social environment so as to render impossible (or at least more difficult) the present prolific life below the National Minimum, or the continuance at large of persons who are either unable or unwilling to come up to the National Minimum Standard of Life;
>
> (2) "Searching out" every person in default irrespective of his destitution or his application for relief;
>
> (3) Medical and other inspection of all infants, school children, sick or mentally defective persons, and all who otherwise need public help, so as to discover the unfit, as well as to remedy their defects;
>
> (4) Segregation, permanent or temporary, of many defective persons now at large;
>
> (5) Enforcement of the responsibilities of parenthood at a high standard, and hence discourgement of marriage among those unable or unwilling to fulfill them; and

(6) Taking care that no one sincerely desirous of fulfilling his social responsibilities shall, by lack of opportunity, be prevented from doing so.

Whilst Webb assured his audience that the Report was constructed "on strictly eugenic principles", what it demonstrates rather is a specific and delimited utilisation of a eugenic strategy. What is entailed is a rigorous discrimination between the socialisable and the residuum, the former being subjected to a regime of environmental improvement, medicalised scrutiny and education; the latter being subject to segregatory treatment.

The fulcrum of this schema was the social apparatus which was to provide the technical means for establishing this rational distribution of individuals. It is on this note that the Minority Report began.[64] It condemned the Poor Laws for their use of the General Mixed Workhouse, with its promiscuous intermingling of the sick, the paupers, the feeble-minded, such that any scientific tretment of the inmates was impossible. While eugenicists saw in the inhabitants of the workhouse only the different manifestations of a single degeneracy of stock, the central operation in the scheme which the Minority Report proposed was discrimination and classification - differential diagnosis and differential treatment. Firstly and most crucially, the differentiation between the able-bodied and the non able-bodied. It was to medicine that this scheme looked for its proposals for the non able-bodied, for the strategy it proposed was one not of relief but of treatment. Drawing upon the proposals for school inspection made by the Interdepartmental Committee of 1904, a series of further discriminations was proposed. Each non able-bodied pauper was to be inspected, classified, distributed to the appropriate authority for specialised treatment: pauper children to

the new Local Authorities, lunatics to the Asylum Committees, the sick to Health Committees, the feeble-minded to a new committee which would ensure their segregation in conditions where breeding was not possible. The Report accepted that this strategy entailed the creation of a group of public officials with sweeping powers of detention over those who fell below the minimum standards of mental and physical fitness recognised by society: this was the necessary price of protection for the community, and the decisions were, of course, to be taken on purely scientific grounds.

To substitute treatment for relief in a total programme for rationalisation of social administration implied that attention could no longer be confined to the traditional objects of policy. But whilst in respect of the non able-bodied there was an established body of knowledge to draw upon "in the prevention and treatment of Able-bodied Destitution and Distress from Unemployment, we are, at the beginning of the twentieth century, in a position somewhat similar to that in which the prevention and treatment of sickness stood at the opening of the nineteenth century. We still have to work out by actual practice the appropriate technique."[65] In relation to unemployment, the technical device adopted by the Minority Report was the Labour Exchange. Drawing on Beveridge's proposals, it advocated the utilisation of this mechanism for the rationalisation of the labour market and the elimination of futile drifting and wastage in periods beteen work. Coupled with decasualisation, the Labour Exchange would transform the market for employment into one whose workings were ordered and visible. But it would not only enable those genuinely seeking work to find it; more importantly it enabled those not genuinely seeking work to be identified. The Report quotes Beveridge:[66]

decasualisation will reconstruct the whole conditions of life in

> the lower ranks of industry, sifting out for remedial treatment a certain number of 'unemployables' and forcing up the level of all the rest. It will replace the casual class - always on the verge of distress, always without reserves for an emergency - by a class for whom the words foresight, organisation and thrift may represent not a mockery but a reality.

Decasualisation and the Labour Exchange: together they were to allow the elimination of random straying around the countryside:[67]

> So long as the workman in search of a job has to wander, it is impossible to distinguish between him and the Professional Vagrant... With a National Labour Exchange organised in all towns there will cease to be any excuse for wandering in search of work... If this were done it would be possible to make all the minor offences of Vagrancy... occasions for <u>instant and invariable commitment</u> by the Justices to one or other of the reformatory detention colonies which must form an integral part of the system of provision.

The Report here took up the theme of internal colonies, deployed in a variety of strategies during this period, not simply for compulsory detention and reformation but also for the solution to urban poverty and overcrowding and the revitalisation of the economy through the bringing into cultivation of abandoned or under-utilised agricultural land.[68] But for present purposes, this aspect is of less importance than another.

Labour Exchanges were significant not only because they allowed labour to be exchanged but also because, like the schools in relation to children, they provided a site for the production of knowledge, the extraction of information and the application of diagnosis and

treatment. In relation to unemployment, they allowed the various forms of lack of employment to be analysed and documented, causes sought and treatments deployed. But before the treatment must come the diagnosis. Unemployment may operate on the population as a whole and result from a generalised condition of the market, but it nonetheless operated by selecting out individuals. The question had to be posed: why these individuals and not others?:[69]

> The first thing to be done is to "test" them, using the word in its proper sense... [whatever the general causes of unemployment] it is inevitable that the <u>particular individuals</u> who, in that crisis, find themselves the neglected of all employees should be capable of improvement either physical or mental. Which of us, indeed, is not capable of improvement by careful testing and training...? The National Authority dealing with the Able-bodied requires, therefore, what we might almost term a Human Sorting House, where each man's faculties would be tested to see what could be made of him; and a series of Training Establishments, to one or other of which the heterogeneous residuum of Unemployed would be assigned.

Again we can see the particular combination of a concern for the wellbeing of the population as a whole and the pertinence of the characteristics of the individuals who make it up. Individualise, discriminate, test, train, reform according to appropriate social norms and release the previously unemployed back into the community. These individuals would now be trained to the highest levels of physical and mental efficiency to which they could be raised, and would have become accustomed to the salutory discipline imposed by a regime which would be the double of employment but rather more severe and hence still in keeping with the principle of less eligibility.

We can see how this schema makes individualised assessment the key moment in a strategy which has as its objective not the permanent segregation of a group of individuals carrying degenerate stock who must be prevented from reproducing their kind, but the resocialisation and productive utilisation of a previously unproductive dead weight on the population.

In the strategy put forward in the Minority Report, social intervention was discontinuous, prohibitory and ex post facto; it was the penalty for neglecting one's obligations to society:[70]

> So long as he commits no crime, and neglects none of his social obligations - so long as he does not fail to get lodging, food and clothing for himself and his family - so long as his children are not found lacking medical attendance when ill, or underfed at school - so long, indeed, as neither he nor his family ask nor require any form of Public Assistance, he will be free to live as he likes. But directly any of these things happen, it will be a condition that the husband and father, if certified as Able-bodied, shall be in attendance at the Training Establishment to which he is assigned. If he is recalcitrant, he will be judicially committed to a Detention Colony.

The Minority Report thus demonstrates the productive possibilities of a combination of eugenicist and neo-hygienist strategies, and the key role within such a combination which was accorded to the individualisation, diagnosis and classification of those who came into contact with the agencies of the state, be this via the school or the Labour Exchange. It was within such a schema that a psychology of the individual would find its objects and its point of insertion in the first decades of the twentieth century. It sought to become a new clinical instance with respect to pathologies of

intellect and the disorders of behaviour to which they led. And it engaged in a struggle with doctors and neo-hygienists to establish individual psychology as an independent, non-medical, diagnostic and therapeutic expertise.

As is well known, the scheme of social legislation undertaken by the Liberal Governments of 1906 and 1914 implemented neither the proposals of the Minority nor of the Majority Report of the Royal Commission on the Poor Laws. In the insurance based strategies for social regulation which began to be formulated in during this period, socialisation was not something to be enforced as a penalty for resisting social norms, something operative ex post facto and relying on individualisation and classification. On the contrary, insurance was, in its ideal form, general, universal, compulsory and preventive. It entailed a radical restructuring of the relations between government and population, opening a direct contractual relation between each and every individual and the state, a relation of mutual obligation in which both parties had their rights and their duties, and which, though technical in its form, was moral in its intentions and consequences. But in respect of one particular class of 'unemployables', the Webb's schema proved no dead letter. This was in relation to a category of degenerates who came to occupy a very special place within the social and political arguments of the early twentieth century, and who came to be termed the feeble-minded. It was these feeble-minded persons - their diagnosis, classification, administration and treatment - who provided individual psychology with its first objects and targets.

NOTES TO CHAPTER FIVE

1 Marshall, 1890, pp225-226.

2 Galton, 1883 p25n. There is an extensive secondary literature on the origin of Galton's eugenic ideas and their social conditions. See especially Buss, 1976; Cowan, 1972; Cowan, 1977; Mackenzie, 1981 Ch 3. See also Pearson 1914-30 and Blacker, 1952. For genetics and eugenics in America, see Pickens, 1968; Kamin, 1977, Chs 1 and 2 and the references cited in n43 to Chapter 4 above.

3 Galton, [1892] 1962, p41.

4 Galton, 1883, pp1-2.

5 Jacob, 1974, p174.

6 Galton, 1889, p35.

7 Ibid, p60.

8 Jacob, op cit, p166.

9 Malthus, [1798] 1976.

10 Galton, 1883, p314ff.

11 Darwin, [1859] 1968, p108.

12 Ibid, p117.

13 Ibid, p102.

14 Jacob, op cit, p167.

15 Galton, 1883, p49.

16 Cf Galton, 1889, p55.

17 Galton, 1883, p50.

18 Ibid, p52.

19 Galton, 1889, p62.

20 Galton, 1869, p26.

21 Ibid, p36.

22 The first formulation of this is in Galton, 1865. For a useful discussion of the Darwinian theory of blending inheritance, see Vorzimmer, 1963.

23 Pearson, 1898. The debate between biometricians and Mendelians has been much discussed. For an account of the issues see Frogget and Nevin, 1971. For attempts at social explanation in terms of interests and the like, see Farrall, 1975 and

Mackenzie, 1981, Ch 6.

24 See especially Darwin, 1868, vol 2.

25 In this respect he anticipated Weismann's (1893) theory of germ plasm.

26 Galton, 1883, p25, p27.

27 Ibid, p20, p23.

28 Galton, 1892, pp 395-396.

28 White, 1886, p49.

30 Galton, 1901.

31 Ibid, p664.

32 Ibid, p663.

33 Galton, 1907.

34 Galton, 1901, p665.

35 Cf Cowan, 1977.

36 The most extensive discussion, well referenced to the eugenic literature, is Searle, 1976.

37 cf Searle 1978; Mackenzie, 1976.

38 Schumpeter, 1954, pp 250-276 has a useful account of debates over population in politicaland economic discourse. See also Glass, 1978 for a discussion of the eighteenth century debate.

39 Child, 1690, Ch 10.

40 See Schumpeter, op cit and Cullen, 1975.

41 Turgot, [1788] 1793, Section 5.

42 Malthus, [1798] 1976.

43 Searle, 1971.

44 See White, 1901; Pearson, 1901; Shaw, 1900, Chamberlain, 1903. It should be noted that the link between the fortunes of the nation, competition, efficiency and fitness were not made only by the apologists of imperialism, they also organised the arguments of those who were concerned to oppose imperialism. Thus, for example, Hobson's famous (1902) critique of the economic justification for imperialism (in favour of a theory of underconsumption), the political rationale for imperialism (it was in the interests only of a class of economic parasites, monopolists and militarists) and the moral basis of imperialism (in favour of a 'rational humanism') nonetheless operated on this terrain when it argued for the substitution of 'rational' for 'natural' selection among nations in a federation of

civilised states (cf ibid, Part II, Chapter II).

45 For a discussion of Spencer and the general theme of 'evolution' in social thought see Spencer, 1972 and Burrow, 1966.

46 Lenin [1917] 1964; on the Austro-Marxists see Bottomore and Goode, 1978; for Chamberlain see the speeches collected in Chamberlain, 1903. For a discussion of the links between social imperialism and social reform, see Semmel, 1960.

47 Cf Shadwell, [1896] 1909.

48 White, 1901, pvii.

49 Ibid, pp 102-3. For texts elaborating on this theme see also Warren, 1901; Pearson, 1901; Maurice, 1903; Shee, 1903; Horsfall, 1904. See also the discussions in Searle, 1971, Ch 3 and Gilbert, 1966, pp 88-101.

50 Some of these issues are discussed in Lewis, 1980.

51 Galton, 1883, pp 318-319.

52 Pearson, 1904, p159.

53 For discussion of Pearson and biometrics see Semmel, 1960, Ch 2; Searle, 1976; Norton, 1978; Mackenzie, 1981, Ch 4.

54 Heron, 1906, p22.

55 Cf Mackenzie, 1976; Searle, 1976.

56 Rowntree, 1901, pp 216-221.

57 These questions are well discussed in Williams, 1981, Ch 8.

58 Rowntree, 1913, pp 148-149; cf Williams op cit, pp 34-7ff.

59 Rowntree, 1914, esp Ch 5.

60 British Medical Journal, 1903, p208. One can also locate here the strategy of school clinics, open air night camps and camp schools whose most notable British proponents were Margaret and Rachel McMillan, cf McMillan,1930 and the discussion in Whitbread, 1972. Some of these items are picked up again in Chapter 8 below.

61 Inter-Departmental Committee on Physical Deterioration, 1904, p14.

62 The Inter-Departmental Committee's recommendations on the provision of school meals was embodied in permissive legislation in the Education (Provision of Meals) Act 1906; their recommendations on school medical inspection in the Education (Administrative Provisions) Act 1907, which marked the establishment of the School Medical Service; neglect of a child's health by a parent was made a legal offence in the Children Act of 1908, the first maternity clinics and child

welfare clinics again were established in this period. These questions are discussed further in Chapter 8 below.

63 Webb, 1910, pp 240-241.

64 Royal Commission on the Poor Laws and the Relief of Distress, 1909, Minority Report.

65 Ibid, p1179.

66 Beveridge, 1909, p129, quoted in ibid, p1187.

67 Ibid, pp 1188-1189.

68 For a discussion of these proposals, see Harris, 1972 Ch 3; cf also Brown 1968.

69 Royal Commission on the Poor Laws and the Relief of Distress, 1909, p1204.

70 Ibid, p1206.

CHAPTER SIX

THE PSYCHOLOGY OF THE INDIVIDUAL

> Like so many advances in theoretical science, the annexation of this new field [of individual psychology] may be traced to the pressure of practical needs. The psychology of education, of industry, and of war, the study of the criminal, the defective and the insane, all depend for their development upon a sound analysis of individual differences; and the investigation of the more practical problems has already begun to pay back its debt, by furnishing fresh data of the utmost value to the mother science. And so at last we have seen the birth of the youngest member in the list of sciences - the psychology of the individual... It aims at almost mathematical precision, and proposes nothing less than the measurement of mental powers.
>
> Cyril Burt, 1927[1]

When Cyril Burt became "the first official psychologist in the world" in 1913, his principal task was the examination of elementary school children who had been nominated for admission to schools for the mentally defective.[2] It was in relation to the assessment of the mental powers of individuals, in particular the ascertainment of the degrees of mental defectiveness or feeble-mindedness which individuals manifested, that psychology made its first inroads into the practices of administration and began to establish itself as a functioning social practice. And the psychology that established itself in this way characterised itself as the psychology of the individual. This chapter examines the formation of the psychology of

the individual as a scientific discourse, its objects and modes of conceptualisation, its organisation as a practice and the social deployment of its agents, explanations and claims to truth.

Speaking in Edinburgh in 1927, on the subject of the measurement of mental capacities, Cyril Burt began by reflecting on the conditions of emergence of the scientific pychology of which he was a spokesman. He identified two major transformations - that in the nineteenth century wherein psychology changed its method to that of systematic observations and research, and that in the twentieth century wherein psychology changed its subject from man-in-general to a concern with individual differences.[3] For Burt, the scientific psychology of the twentieth century constituted itself around the question of the individual and its differentiation. It was on this subject that Alfred Binet and his pupil, Victor Henri, elaborated in their programmatic text of 1896, 'La psychologie individuelle' - a text implicated in the very transformation upon which Burt was reflecting. "The aim of individual psychology," they began, "is to study different psychic processes in man and, in studying them, to pay attention to the individual differences in them... Individual psychology...studies the properties of psychic processes that vary from individual to individual - it has to determine the various properties and then study how much and in what respect they vary with the individual".[4] The psychology of the individual, for Binet, thus formed itself around the twin operations of measurement and differentiation - its object was specifiable only to the extent that it was constituted as both measurable and differentiable. The object that was constituted for and through this psychology, which was both its object and its target, was the psychological individual itself:[5]

> We must search with the present knowledge and methods at hand for a series of tests to apply to an individual in order to

distinguish him from others and to enable us to deduce general conclusions relative to certain of his habits and faculties...

The studies of individual psychology are one of psychology's most important practical applications since their aim is knowledge of the individual, and they must be examined and directed toward the goal we would affirm. There are, it seems, four principal routes to be pursued: the study of races, the study of children, the study of patients and the study of criminals.

Perhaps it was because the mental defective was such an apt combination of these four routes in one - part race, part child, part patient, part criminal - that it would be around a question of mental defect that the individual psychology of the first decades of the twentieth century would begin to organise itself. As a knowledge, as a technique and as a complex of agents and agencies, the first objective of the psychology of the individual was to be the mental defective, or rather, the 'feeble-minded'.

The discovery of the feeble-minded

Of the gravity of the present state of things there is no doubt. The mass of facts that we have collected, the statements of our witnesses, and our own personal visits and investigations compel the conclusion that there are numbers of mentally defective persons whose training is neglected, over whom no sufficient control is exercised, and whose wayward and irresponsible lives are productive of crime and misery, of much injury and mischief to themselves and to others, and of much continuous expenditure wasteful to the community and to individual families.

Royal Commission on the Care and Control of the Feeble-minded, 1908[6]

It is tempting to regard the public debate over the feeble-minded, the setting up of the Royal Commission on the Care and Control of the Feeble-Minded consequent upon it, and the passage of the Mental Deficiency Act 1913, as the one success of the eugenicist strategy. We have seen in the last chapter that the transformations of social policy which occurred in the early twentieth century can not be usefully understood as a realisation of such a eugenicist strategy, although eugenic arguments played a definite though circumscribed part in the debates which led up to them. But the feeble-minded were, of course, fundamental targets of eugenics - not merely one category of problems amongst others, but having a matrix role in establishing the relations between all the different types of social problem. From Galton onwards, variations in human intellectual powers were necessarily linked with variations in industriousness, moral and civic worth and so forth. Any individual's share of each of these was a consequence of the possession of a certain quantity of variable, constitutional and heritable vital energy. An individual's intellect was thus an index of the general quality of stock.

For the eugenicists in the debates at the turn of the century, mental defectives progressively became the archetypal representatives of the deterioration of the race. In them were conjoined all those behaviours in which degenerate stock might manifest itself: immorality, criminality, indigence, inebriety, vagrancy, unemployability and, crucially, prostitution and promiscuity. Mental deficiency was well known to run in families, and hence here at least it was beyond dispute that degeneracy was transmitted through heredity. The mental defective was unsocialisable, congenitally incapable of receiving the moralising influences of civilised life,

and hence the fact of defectiveness could explain all those behaviours which constituted degeneracy. And, crucially, the reproductive activities of the mentally defective posed a major threat. For the defective was impervious to the imprecations of morality and the curb on promiscuous sexuality which conscience and responsibility produced. And the old link between idiocy, animality and profligate sexual couplings took on a new significance when redeployed in a discourse convinced of the malign consequences of differential fertility. The mental defective, indiscriminately propagating degenerate stock and incapable of voluntary limitation of reproductive functions was a justification for the eugenic proposals of compulsory permanent segregation and/or sterilisation.[7]

It is certainly the case that these eugenic arguments had a place and a function in the events which we are about to discuss, but an investigation of the terms of the Commission's discussion and recommendations, and the nature of the Act, demonstrates that these were no simple actualisation of the eugenic position. It would be misleading to conceive of what was involved here in terms of a single campaign which obtained a hold on the real through its insertion into a 'moral panic' concerning racial degeneracy, or as the success of the 'moral entrepreneurship' of the eugenicists.[8] This would make it impossible to understand the terrain upon which the early psychological discussions of the measurement of mental ability operated, the configuration into which the first test of intelligence was inserted, and the fact that the key professional agents involved were neither psychologists nor eugenicists but doctors.

Eugenics constituted mental defectives as a <u>threat</u>, both immediate in terms of the social problems with which they were associated, and long term, in relation to the decline of the quality of the population resulting from their high rate of reproduction.

But the mental defective had already entered social and political arguments in at least three other ways - as a challenge to philanthropy and science, as a burden upon the nation and those producing its wealth, and as an obstacle to the smooth operation of a universal system of education. It is necessary for us to trace briefly the characteristics of these different arguments and the strategies to which they were linked.

No general problem of idiocy existed before the nineteenth century.[9] Different practices and different discourses varied in the significance accorded to the term 'idiot', and in the status and consequences of idiocy. Legislation very early made a distinction between the idiot, or natural fool, and the lunatic, with regard to property rights over their estates. Thus in 1325 the King's prerogative was affirmed in the statute De praerogativa regis as:[10]

1 To protect the lands of idiots and take the profits of them and provide for their necessities, and to render the lands on death to their rightful heirs; and

2 To provide for the safe keeping of the lands of lunatics so that the lands may be restored to them on recovery or to their representatives on their death.

But while this distinction between lunatics as curable, potentially able to regain their normal faculties, and idiots as incurable, bound to suffer for life, crosscut many arguments, the law was only concerned with such questions to the extent that they involved rights over property. In theological discussions the significance accorded to idiocy was very different. Were fools equal to others in the sight of God? Were they closer to God because through them the truth could clearly shine? Were they a punishment inflicted upon families

for their wrongdoing? Were they the result of sin, or sexual intercourse with the devil? Were they a test by God of man's humanity and compassion (as God is to man, so man is to fool)? For those involved with administering the Poor Law and other social institutions, from the eighteenth century onwards, idiots were merely one element amongst those filling the poor houses, work houses, gaols and lunatic asylums on account of their inability or unwillingness to enter productive employment or abide by the requirements of the law. Which of these institutions idiots ended up in depended upon the contingent events which might bring them into contact with parish or other authorities. As far as medicine was concerned, as we have seen in Chapter Three, the incurability of idiocy made it unfavourable and uninteresting material both for eighteenth century medical practice and for the emerging moral treatment of the nineteenth century. Although there were debates over aetiology or over diagnosis, once the classification of idiocy had been established this was equivalent to an affirmation of intractability to medicine.

When in the mid-nineteenth century idiots became a possible and distinct object for reformatory education it was, as we have seen, within a philanthropic strategy which sought to rescue and improve a previously neglected class of unfortunates. This new target for philanthropy did not come about through disputing the medical judgment concerning the <u>incurability</u> of the idiot. As we saw in Chapter Three, Itard set out to train the 'Wild Boy of Aveyron' with the conviction that he was <u>not</u> an idiot, and that his condition was a consequence of his life outside human society. But Seguin believed that the Wild Boy <u>had</u> been an idiot, and took the results of of Itard's labours to show that idiots, whilst not being curable, were nonetheless improvable, trainable, educable. The first asylum in England specifically for idiots was founded in 1847 in Highgate,

London. Its brochure proclaimed the discovery that had provided its inspiration: "We have laboured under the appalling conviction that idiocy is without remedy, and therefore we have left it without help. It may now be proclaimed, not as opinion but as a fact, a delightful fact, that THE IDIOT MAY BE EDUCATED".[11]

It was as a new object for philanthropy that the idiot first became a discrete and specific target for social reform in England. For Seguin's philanthropic discovery was not isolated; the conditions which made it possible and allowed for its social deployment also obtained elsewhere. Within a few years of his work Saegert in Germany and Guggenbuhl in Switzerland, apparently independently, discovered that idiots were educable. And in America, Sidney Howe led a campaign for the public education of idiots from the 1840's onwards.[12] Reports of the work of Seguin are said to have provided the inspiration for the first English asylum in Highgate. In the decade which followed, a number of similar institutions for the education of idiots opened in England. The Highgate Asylum moved to new premises to become the famous Earlswood asylum and was complemented by institutions at Star Cross and Knowle. From about four hundred inmates of idiot asylums in England in 1864, the number rather more than doubled in the next decades. Texts of the period extol the order, calm, obedience, diligence and cheerfulness which characterised these institutions, their improving effects upon bodily and mental discipline, the very fulfilment of Seguin's programme of physiological education.[13]

But only some three percent of the estimated 29,542 idiot inmates of institutions in 1881 were in such asylums.[14] The remainder were still intermingled with criminals, lunatics, indigents and others in workhouses, lunatic asylums and prisons. For these

specialised idiot asylums were directed towards the improvable idiot, they charged for their inmates, and they explicitly excluded paupers. And it was these pauper idiots who were to be the focus of a second discourse on idiocy which emerged towards the end of the nineteenth century, a discourse for which the idiot was not so much a challenge for a scientific and philanthropic pedagogy, as a burden on the nation and its families and an exacerbation of social problems.

It was the Charity Organisation Society which was the locus for the organisation and promotion of the need for State action to counter the burden of the idiot. Despite its general strategy of self help, of individualised case-work methods linked to the moral reformation of the poor and hence the suppression of mendicancy, the Society argued that the case of the idiot warranted action by the State in respect to a whole class of persons who were presently exacerbating social problems in a number of different ways. Firstly, idiots were a large and increasing drain on the poor rates. The Lunatic Asylums Act of 1853 required that the Justices of each county provide an asylum "for the pauper lunatics thereof", where the word "lunatic" included every person of unsound mind and "every person being an idiot." The Act did not prevent the provision for these idiots in separate institutions, but it was only in London that such separate provision was made. The Metropolitan Poor Act 1867 created a Metropolitan Asylums Board in London with the power to transfer idiots and imbeciles from the Metropolitan workhouses and lunatic asylums to the Caterham, Leavesden and Hampstead Idiot Asylums, and after 1875 a further separation was made, between children and adults, with the building of the Darenth training schools near Dartford.[16]

When the Charity Organisation Society's Special Committee on the Education and Care of Idiots, Imbeciles and Harmless Lunatics

(set up at the instigation of Sir Charles Trevelyan) reported in 1877, it estimated that there were 49,041 individuals in these categories.[17] Basing its figures on census returns, it reckoned that 35,963 of these in England and Wales were chargeable to the poor rates, but only a very small proportion of these, around ten perecent, were in receipt of specialised treatment. The bulk of the remainder were promiscuously intermingled in the public workhouses, in lunatic asylums and in prisons, a burden on the rates, yet receiving nothing which might improve them as a consequence of this financial obligation. Yet, whilst only a small proportion of these might be made self-supporting, a further large proportion might be trained to do some useful work, and "the habits of the remainder can be improved so as to make their lives happier to themselves and less burdensome to others".[18]

The recommendations of the Report urged special treatment for idiots, imbeciles and harmless lunatics and the application to them of the special means of training based upon education of the senses. But the Charity Organisation Society was not inspired by that philanthropy which had caused Seguin some forty years earlier to single out the similarly intermingled improvable idiots for specialised reformatory treatment. What motivated the strategy put forward by the Charity Organisation Society was not philanthropy but economy. The idiot was an economic burden in four ways. Firstly, the present cost to the rates was in no way justified by the reformatory effects of the instutionalisation which was provided; indeed institutionalisation exacerbated the dependence of the idiot rather than ameliorating it. Secondly, and linked, the present situation ran counter to the principles of political economy, for idiots so treated represented a waste of useful labour and a drain on

economic resources, whereas, under appropriate management, they could not only provide for their own support, but also contribute to industry and agriculture. This would have the additional advantage of allowing the idiot to benefit mentally and morally from the industrial principle. Thirdly, those idiots at present outside institutions were continually open to ill-use and exploitation by corrupt and criminal elements, further exacerbating the demoralising milieu which was the very source of the social problem which so much money and effort was being expended to eradicate. And fourthly, idiots placed an entail upon their families, disadvantaging them, an extra burden in their struggle for existence which might easily force them down towards mendicancy and the workhouse. Sir Charles Trevelyan put it thus, when he presented the Report to the Local Government Board:[19]

> The majority of our working-class families have a hard struggle for existence in which every member of the family old enough to be put to work is a participant. The exceptional burden which an idiot child entails upon such a family, and the impossibility of their providing for him at home the care and training which he ought to receive, establish a strong claim for assistance from public funds. Without this the whole family may be pauperised, and the imbecile member, besides being doomed to a life of misery, may become a permanent source of expense which might have been avoided had he received proper instruction when young.

Indeed these arguments might appear to have been politically successful. The Idiots Act of 1866 passed uncontroversially through parliament. It distinguished idiots and imbeciles from lunatics, and it laid down conditions for their admission to and discharge from

asylums, and for their registration and inspection. But to take this for a success would be to fall into the trap of confusing the passage of a law with the construction of an effective apparatus. Not only was very little of the separate provision allowed for in the Act ever established, but the Lunacy Act of 1890, which was to consolidate the various enactments with regard to lunacy over the last half of the ninetenth century, failed to make any such distinction, merely saying, in Section 341, "'Lunatic' means an idiot or person of unsound mind".[20]

The question of mental defect would have to be reformulated before it could move, as a specific problem, to the centre of the debate over the social question. This reformulation revolved around the category not of idiocy or imbecility, but of feeble-mindedness. The idiot, from Pinel through Esquirol and Seguin to the Charity Organisation Society, was visible. The mark of idiocy was impressed upon the surfaces of the body, in physical signs and external stigmata. Idiots might pose a problem of economy, a problem of order, a problem of philanthropy, pedagogy or treatment but they did not pose a problem of detection except in a few, rare, doubtful cases.[21] As the category of feeble-mindedness began to solidify, a transitional state was introduced between the normal and the pathological. The defective mind began to lose its immediate links with the defective body; the surface of the body gradually began to lose its ability adequately to represent its truth and inner nature. Idiocy was no longer readable on sight, through the interpretation of visible bodily signs. In the category of feeble-mindedness, idiocy was progressively hidden from view, hidden in order to be discovered. It was the consequences of this shift, rather than a simple 'eugenic panic', which provided the conditions for the widespread social concern which led to the Royal Commission on the Feeble-Minded and

the Mental Deficiency Act 1913. And it was this too which provided the pertinence for a technique of measurement of intellectual powers, and for a psychology of individual differences.

The place of the idiot in the discourse of degeneracy has already been alluded to. The medical texts of the second half of the nineteenth century analysed idiocy in these terms. Willis had already suggested, in the seventeenth century, that parental intemperance, indigence or vice might lead to the production of idiot children.[22] Howe's influential text On the Causes of Idiocy, published in 1848, similarly argued that idiot children were produced as a result of intemperance, masturbation, ill-health, fright and so forth in the parents, in combination with a general inherited disposition to idiocy.[23] And Ireland, a Superintendant of a Scottish idiot asylum, repeated the familiar configuration of inherited predisposition, itself perhaps acquired as a result of unhealthy or vicious influences, manifesting itself in the appearance of insanity, imbecility or epilepsy among family members.[24] Ireland, in 1877, paraded before his readers the figures of the ten types of idiocy, marked by their syphilitic teeth, misshapen palates, malformed or incorrectly proportioned heads, irregular limbs - each combination of stigmata expressing some particular organic defect, usually a brain lesion. But Ireland already felt the need to justify this analysis and approach to diagnosis against another, which tried to base itself not upon brain lesions and stigmata but a belief that the deficit remaining almost entirely in the mind, a "want or hebetude of intellect".[25]

What was involved in the formation of the category of feeble-mindedness was first of all a different mode of connection amongst the elements which went to make up idiocy as a functioning social

reality. This different mode of connection involved a different form of diagnosis, and crucially one which had a different surface of emergence. In the category of the feeble-minded there was a connection, not between brain lesions and visible stigmata, but between a disordered or defective mind and undesirable behaviours. It was through the interpretation of behaviours that the detection of the feeble-minded would eventually proceed. This was because it was in defects and problems of behaviour that feeble-mindedness inhered. And this problem of deficiencies in behaviours, most especially in those behaviours demanded of a subject of pedagogy, emerged not in the prisons, the asylums or the workhouses - though it had consequences for all of these - but in the schools.

The discovery of the feeble-minded allowed a transformation in the relation between the idiot and the normal from discontinuity to continuity. There was a shift from a table or typology, in which a number of qualitatively distinct categories were ranged alongside one another in a fixed relationship, to a configuration in which all individuals could be placed on a continuum from the highest of intellects to the most stupid of idiots. This involved a contested transformation of the space in which this variability inhered, from the brain, the object of the discourse of medicine and the domain proper to medical adjudication, to the mind, to a question of mental powers and a domain to which psychology sought to stake its claim.

Of course, questions of education had been bound up with general social programmatics of reform and moralisation since at least the late eighteenth century.[26] But the institution in the 1870's of a system of universal education which was both free and compulsory created a generalised field for the inspection and evaluation of conducts, capacities and behaviours. It created a site within which that evaluation could occur, a common standard of

evaluation, a set of norms and expectations tied to the functioning of the techniques of pedagogy in the schools, and a group of agents whose daily activities depended upon the ability of individual children to display appropriate capacities and conducts. The technology of education required certain attributes in those who were to be its subjects, and the schools were filled with crowds of children who, for a whole variety of reasons, could not support the interpellation which was addressed to them. It was, first of all, a problem of the senses. The blind, the deaf, the dumb - those figures who had already occupied such a privileged place in sensationalist philosophy - now presented a problem of a different order, for their physical disabilities made them unable to receive the sensory input upon which pedagogy relied.[27] But there were also rapidly found to be children who, while apparently fully provided with their complement of senses, appeared unable to learn the lessons of the school.[28] The Royal Commission on the Elementary Education Acts requested the Royal Commission on the Blind, Deaf and Dumb to consider the treatment of these children in detail, and it was to this class of children that their Report of 1889 referred as 'educational imbeciles', or, more simply, the feeble-minded.[29]

The term 'feeble-minded' gradually came, in England, to designate those who, whilst not committable to an asylum under the various lunacy laws, were nonetheless sufficiently weak-minded to be incapable of receiving the benefits of socialisation in general, and education in particular.[30] Thus the Defective and Epileptic Children Committee of the Education Department reported in 1898 that:[31]

> From the normal child down to the lowest idiot, there are degrees of deficiency of mental power; and it is only a difference of degree which distinguishes the feeble-minded

children referred to in our enquiry, on the one side from the backward children who are found in every school and, on the other side, from the children who are too deficient to receive proper benefit from any teaching which the School Authorities can give... Though the difference in mental powers is one of degree only, the difference of treatment which is required is such as to make these children, for practical purposes, a distinct class.

This Committee adopted the term 'feeble-minded' from the Royal Commission on the Blind, Deaf and Dumb and from the Poor Law Schools Committee, which had expressed its concern in 1896 that so many of its children were of the feeble-minded class.[32] Gradually a link was established between feeble-mindedness and pauperism, though not, in the first instance, in terms of arguments about progressive degeneration or eugenics. Rather, the problem was the excessive number of children in the pauper class who required special educational provision, the cost of this provision, the consequences of not providing it, and the means of establishing who needed it.

The estimation of numbers seemed at first to present no problems, at least not to the trained eye. The Charity Organisation Society, aided by funds from the British Association and the British Medical Association, set up a committee in 1890 to arrange a series of school inspections with a view to discovering what proportion of pupils in different areas suffered from physical, mental and moral defects.[33] Dr Francis Warner, who carried out the investigations, was Professor of Anatomy and Physiology in the Royal College of Surgeons. He had published his "Method of examining children in schools as to their development and brain condition" in the British Medical Journal of 1888.[34] This was a technique of reading from

physical stigmata and bodily comportment back to underlying pathologies of the brain. Children exhibited themselves to the doctor, who observed "(a) the form, proportion and texture of the visible parts of the body; and (b) the signs of action in the central nervous system, as seen in the muscles producing movements or attitudes or balances of nerve-muscular accuracy".[35] This was a procedure which Warner considered to be both practicable in terms of time and reliable in terms of scientific accuracy. On the basis of this method, Warner considered that some fifteen percent of the 50,000 schoolchildren whom he surveyed were defective in some respect - dull, defective in nutrition or with nervous defects - and about one percent were feeble-minded.[36]

And the weight of numbers was demonstrated in a more practically compelling sense. For large numbers of children accumulated in the 'Standard 0' classes, apparently incapable of reaching the standards laid down in the Board of Education's code. The London School Board had begun to group such children in special schools in 1891, following the advice of the Royal Commission on the Blind, Deaf and Dumb. When legislation authorised special grants for provision for blind and deaf children in 1893, they urgently requested larger grants for these feeble-minded children as well, in the light of the increasing cost of such schools.[37]

There could be no doubt that here were a class of persons who were not legally committable to asylums yet were a constant drain on the resources of the school boards, the poor law authorities and the State. A group which did not constitute the same sort of burden as the idiot and the imbecile, for they were able, to some extent, to mingle with normal society. Yet precisely this exacerbated the problem because, though this was not immediately obvious, their moral senses had not been awakened either by parental, religious or

educational influences, and hence they were in constant danger of exploitation by others and lived a life of considerable unhappiness to themselves. Three quesions were constantly posed within the growing debate on the feeble-minded in the last decade of the nineteenth century. How were these feeble-minded children to be detected; how could they be socialised to awaken their moral sensibilities and to make them resistant to the temptations of vice and crime; what was to become of them when they were no longer of school age? It was these questions that the Defective and Epileptic Children Committee of the Education Department was set up to consider.

The Committee was particularly concerned with the first question. What means of identification of this class of children requiring special treatment were to be utilised, and who were the appropriate agents to utilise these means? The witnesses to the Committee were principally doctors and the criteria which they advocated were constructed in terms of the familiar combinations of physical stigmata. The Committee agreed wih Warner, Beach, Shuttleworth and Harris that, like idiocy and imbecility, feeble-mindedness was inscribed upon the surface of the body:[38]

> Feeble-minded children are, in the great majority of cases, marked by physical defect or defects discernable to the trained observer... The most conspicuous of such defects are irregularity in general bodily conformation, malformation of the head, the palate, tongue, lips, teeth and ears, defective power of motion or control in almost any of the different forms of muscular action, as shown in balance, attitude and movement, and defects in some one or more of the sensory functions, besides the ordinary varieties of deformity and ill health.

Yet the knowledge required for such a reading was becoming increasingly esoteric. Signs were becoming deceptive to the untrained eye, significant only in their combinations and when supplemented by life histories and information about family background, even requiring on occasions examination of the intellectual powers of the child directly by means of assessing their performance on a task involving reading or numbers. So specialised had this knowledge become that Beach estimated that there were no more than six doctors in England capable of discriminating between feeble-mindedness and imbecility,[39] and even amongst the witnesses to the Committee there was no agreement on criteria. Whilst the Committee recommended legislation, the Permanent Secretary had to admit, during the drafting of the Bill, that none of the Committee's witnesses had been able to "offer any verbal definition of that degree of want of intelligence which was to constitute a defective child".[40]

The Committee had to reconcile an impossible contradiction. They were required by their terms of reference to advise on the means of discriminating between idiots, imbeciles, feeble-minded and normal children. The only professional agents with a claim to competence in what remained, after all, a medical problem of mental defect were doctors. Teachers had no claims to rival medicine as the adjudicative instance; psychology did not yet exist as a body of agents with a claim to social expertise. Yet the discovery of feeble-mindedness owed nothing to medicine. The problem emerged in the practices of the school and the classroom, which required certain definite norms of conduct including the capacities to obey the disciplinary demands of pedagogy and to fulfil the expectations as to the tasks of learning which that pedagogy prescribed. In the case of feeble-minded children, then, it was education which had produced the

problem and necessitated the solution: the construction of a specialised apparatus for their training and hence a specialised set of knowledges and techniques for the diagnosis and allocation of feeble-minded individuals. Hence the Committee was forced to adopt educational criteria. Normal children were those capable of benefiting from normal schools; feeble-minded children were those capable of benefiting from special schools, idiots and imbeciles were those incapable of benefiting from schools at all. It was these criteria which were embodied in the permissive Elementary Education (Defective and Epileptic Children) Act of 1899, which gave local authorities the power to create special schools and classes for those children, who, not being either imbeciles or merely backward or dull, were "by reason of mental defect, incapable of receiving proper benefit from the instruction in ordinary schools".[41] Educational criteria and medical agents: this set the scene for a problem which would take over a decade to solve, and established the terrrain for a lengthy battle between doctors and psychologists which is not yet fully resolved.

Ascertaining the problem

By 1903, special schools for the feeble-minded had been established in London and fifty other authorities and, as the act of discrimination became more frequent, the means of discrimination became more crucial and more problematic. Gradually the pertinence of classification by means of visible signs began to be called into doubt as the relation between such signs and the behaviours which were the pedagogic and disciplinary occasion for diagnosis became more obscure. For the teachers and educators, who were given the task of nominating children for examination by medical officers, were

unversed in the esoteric reading of stigmata. They were concerned with the category of feeble-mindedness only as a means of explaining a diverse range of obstructive or undesirable behaviours as consequences of an intelligible and unified cause. Teachers very early on began to develop their own techniques, based upon criteria directly relating to the exigencies of pedagogy, and straightforwardly in terms of behaviours and competences.[42] School medical officers were faced with the problem of reconciling their diagnostic privilege, which they owed to their status as medically qualified agents, with their institutional role. This concerned a problem where clinical judgment was to function as an assessment not of organic malfunction but of social adaptation. They similarly began to utilise a range of means of evaluation in which externally visible physical signs played only a subsidiary part.[43]

Feeble-mindedness thus gradually came to be constructed in terms of a direct link between mental powers and behaviours, a link in which the body was no longer able to have a pivotal role as the surface upon which interpretation was to be exercised. It was in an almost identical situation, in France, that Alfred Binet was called upon to advise upon modes of ascertainment of mentally defective children. A psychological notion of intelligence and the means of assessing it would have the possibility of fulfilling the institutional and administrative role which preceded it and which established the parameters within which it could operate. But before considering Binet's discovery, it is necessary to say a little more about the conjuncture into which his test was inserted in England.

In the debate we have just been examining, it was only at this point, after the formation of the problem of the feeble-minded within quite different strategic configurations, that the eugenicist arguments could come into play. With the discovery of the feeble-

minded, with the link between feeble-mindedness and pauperism, with the emergence of a conception of human powers as varying along a continuum, this class gradually became the ideal object which regulated eugenic discourse. And in this discourse the feeble-minded were not constituted as a challence to philanthropy, as an economic burden, or as an obstacle to the smooth operation of socialising education, but as the evidence and the motive force in an hereditary cycle of urban degeneration and national deterioration, through the means of differential rates of reproduction. The National Association for the Care of the Feeble-minded, established in 1896, was the key organising locus for this strategy, redeploying in the context of a eugenic argument concerning the feeble-minded those familiar pleas for the limitation of the reproduction of degenerates - whether by sterilisation or by permanent segregation. Mary Dendy, one of the major mobilising individuals within this strategy, made this clear in her reflections of 1920:[44]

> These notes are based on the assumption that the children to be cared for are to be detained for the whole of their lives... It was determined from the beginning that only permanent care could be really efficacious in stemming the great evil of feebleness of mind in our country. The idea at first met with much opposition...

And as early as 1903 Ellen Pinsent, the other stalwart of the National Association, argued in the Lancet for a "thorough and complete scheme of State intervention" for the feeble-minded.[45] For Pinsent, the evidence of the schools was re-utilised in this more general strategy with regard to the feeble of mind. Having once discovered the numbers of such children and developed institutional provision for them, were they to be released into society at the end

of compulsory schooling? Surely what was required were "permanent industrial colonies or permanent custodial homes to which children who were unfit to face life on their own responsibility could be transferred" after leaving school, for in this way "they would never be allowed the liberty which they can only misuse to their own degradation and to the degradation of the society in which they live". And if this entailed an exceptional degree of State restriction upon personal liberty, it was only doing sooner what would otherwise be done later when they ended up in the gaols or the workhouse.[46]

It is certainly true that the National Association took upon itself the role of pressurising and of publicising the need for rapid and firm measures to curb the threat posed by the feeble-minded. But the setting up of the Royal Commission on the Care and Control of the Feeble-Minded in 1904, despite its title, seemed to have had less to do with any eugenic concern about the degeneration of the race than with considerations prioritised in the 'economic' strategy discussed earlier. However after the Report of the Royal Commission was published in 1908, the National Association, in conjunction with the Eugenics Education Society, founded in 1907, engaged in a large-scale exercise of propaganda and pressure to ensure the enactment of its recommendations. A flood of books and pamphlets was produced by eugenicists on the threat of the feeble-minded and a joint committee of the two organisations was established, headed by the Archbishops of Canterbury and York, and including many bishops, clergy, doctors and members of the aristocracy, to campaign for the passage of the Mental Deficiency Bill which would translate the recommendations of the Royal Commission into legislation.[47] As the joint committee put it in one of its pamphlets, immediate action was necessary:[48]

BECAUSE at the date of the Report of the Royal Commission, there were 270,000 mentally defective people in England and Wales, of whom 149,000 are uncertified. There is for them no recognised and generally no possible means of control, although they are totally incapable of managing themselves or their affairs... BECAUSE in consequence of the neglect to recognise and treat their condition, the mentally defective become criminals and are sent to prison; they become drunkards and fill the reformatories; they become paupers and pass into the workhouses. BECAUSE they are frequently producing children, many of whom inherit their mental defect, and nearly all of whom become the paupers, criminals and unemployables of the next generation.

And in 1908 Alfred Tredgold published the first edition of what was probably the first theoretical text on mental deficiency from within this new configuration. His Mental Deficiency (Amentia) was to become the standard text on the subject, going through eleven editions, the most recent being published in 1970.[49] Tredgold was a member of the Royal Commission, Consulting Physician to the National Association for the Care of the Feeble-Minded, later Member of the Board of Education Mental Deficiency Committee and the Ministry of Health Committee on Sterilisation (the Brock Committee) of 1932-1933. Summarising the recommendations of the Royal Commission in 1910 he wrote:[50]

The whole tendency of recent enquiries is to show that the feeble-minded are not an isolated class, but they are merely one phase and manifestation of a deeply ingrained degeneracy. They are kith and kin of the epileptic, the insane and mentally unstable, the criminal, the chronic pauper and the unemployable classes, and I am convinced that the great majority of the

dependent classes existing today owe their lack of moral, mental and physical fibre to the fact that they are blood relations of the feeble-minded and are tainted with their degeneracy.

By 1913 when the Mental Deficiency Act was passed, the eugenicist strategy might apper to have won a notable victory. Indeed opposition to the Bill, led by Josiah Wedgwood and Handel Booth, appeared to have limited itself to defensive support of a position which was already anachronistic. For this opposition, the proper limits of State action excluded the forms of social regulation which administrative control of the feeble-minded implied: individual restriction could be justified not on the grounds of what a person was but only on the grounds of what they had done. Only when crimes had been committed, and through the action of the judicial instance subject to the safeguards of due process, had the State the right to deprive someone of their liberty.[51]

Certainly the Report, and the Act which followed, departed fundamentally from such an ideal. Whilst the criminal justice system and the processes of adjudication and sentence have always given some consideration to the nature of the individual who had committed the illegal act, with the entry of psychological criteria into the field of law there was a generalised shift in the object of judgment away from the crime and towards the criminal. But in the majority of cases, and with the exception, as we shall see later, of children, it was still a definite and demonstrable breach of law which was the occasion for adjudication. With the Mental Deficiency Act, this constraint was laid to rest - no act had to have been committed to allow the State to authorise restriction of certain individuals. Not what one does, but <u>who one is</u> and what one <u>might</u> do or what <u>might</u> be done to one, or what one's progeny <u>might</u> do because of this hidden nature - this was what was adjudicated upon. And this adjudication

was done prophylactically, outside the legal process altnough sanctioned by it. It was carried out by agents other than the judiciary, subject to none of the procedures of due process. What was significant about the mechanisms set in place by the Mental Deficiency Act of 1903 was not that they were the realisation of a eugenic strategy, but that they effected this shift in the object, grounds, limits and mechanics of adjudication.

And indeed the Report and the Act did not constitute a eugenic schema. Rather there was a stabilisation of the various strategies concerning the feeble-mided, previously outlined, into complementary axes of a single programme. Within this programme, and the technology to which it gave rise, the feeble-minded became simultaneously the object of a theoretical knowledge and the target of an administrative apparatus. And, as we have seen, this object/target was not the drooling idiot with syphilitic teeth and degenerate ears, but a problem both more direct - concerning the details of behaviours, speech, calculation in relation to the exigencies of a disciplinary pedagogy - and more remote - having its origin not in a defect of brain marked on the body but in an invisible pathology of intellect.

The principles which the Commissioners outlined as their guides in preparing the Report may be used to map the terrain upon which a psychology of measurement and differentiation would operate for the next twenty years:[52]

> persons who cannot take part in the struggle of life owing to mental defect should be afforded by the State such special protection as may be suited to their needs.

Life was a struggle in which the feeble-minded sank to the bottom. They filled our prisons, clogged our schools, burdened our Poor Law

Institutions, occupied our homes for inebriates. And what was worse, they accumulated in our slums out of contact with any institution of the State and open to exploitation by others. Thus these defectives were a burden economically, a concern morally and a threat socially. It was not only that they constituted a problem for society, but also that the defective himself, deprived of the benefits of socialisation and moralisation, lived a life of misery and degradation, unable to aid himself and cruelly used by others.

The obligatory opening of a contract between the State and the defective could thus be presented as a benefit to both parties; thus the discourse which developed on the defective constantly stressed the increase in the happiness of the defective himself which would result from enforcing upon him the benefits of segregation. Hence State intervention, though motivated in part by considerations of finance, in part by considerations of order, could nonetheless congratulate itself on its philanthropic intent:[53]

> the protection of the mentally defective person... should be continued so long as it is necessary for his own good. This we consider desirable, not only in his own interest but also in the interest of the community. It follows that the State should have authority to segregate and detain mentally defective persons under proper conditions and limitations... This... is an extension to the whole class of the mentally defective or advantages now given to lunatics and idiots only.

The Commission certainly did not find it hard to reconcile the varied elements of its programme. It managed without difficulty to articulate the hereditary transmission of defect and the necessity of preventing procreation with the benefits of training both for the defective and for society, and the need for and advantages of

economy. After reviewing the arguments for hereditary and environmental causation in the main body of the Report, it concluded:[55]

> (1) That both on grounds of fact and of theory there is the highest degree of probability that 'feeble-mindedness' is usually spontaneous in origin - that is not due to influences acting on the parent - and tends strongly to be inherited.
>
> (2) That, especially in view of the evidence concerning fertility, the prevention of mentally defective persons from becoming parents would tend largly to diminish the number of such persons in the population.
>
> (3) That the evidence for these conclusions strongly supports measures, which on other grounds are of primary importance, for placing mentally defective persons, men and women, in institutions where they will be employed and detained, and in this way, and in other ways, kept under effective supervision so long as may be necessary.

Even though the behaviours characteristic of feeble-mindedness were most common amongst those brought up in the slums, this did not militate against the hereditarian hypothesis. The Commission appeared to accept Tredgold's position, as, for example, he expressed it in his book:[55]

> My own enquiries have convinced me that in the great majority of these slum cases there is a pronounced morbid inheritance, and that their environment is not the cause, but the <u>result</u> of that heredity. The neuropath is one who is at an economic disadvantage in the struggle for existence. He frequently finds it difficult to hold his place, and he is often possessed of careless, improvident, and intemperate propensities, which cause

him to fritter away the money he does earn. He is on the down grade. No wonder, then, that he drifts to the slums.

Feeble-mindedness had become a question of an hereditarily transmitted attribute, to be controlled by measures of regulated segregation which would alleviate the problem in the short run by removing defectives from the social milieu in which they might cause danger, and curb it in the long term through the limitation on fertility which it imposed.

But central to this new configuration was not so much this analysis, and the quasi-eugenic policy which stemmed from it, but the new object of judgment which was produced. For the Commission was very clear that "the mental condition of the persons, and neither their poverty nor their crime, is the real ground of their claim for help from the State."[56] No doubt the State had intervened in the lives of its subjects on the grounds of their conduct before, referring this conduct to mental pathologies and sometimes employing a measure of compulsion - insanity and idiocy are cases in point. But the case here was rather different, since it was not as if those who would be designated feeble-minded were being arraigned on the basis of some natural incapacity to exist without support. Not only was this incapacity specific - in the case of children, what counted as incapacity was set by an educational norm and the pedagogic expectations which flowed from it - but the incapacity itself was, in a peculiar sense, beside the point. The behaviours in which feeble-mindedness was evident were, in large measure, important as a justification for intervention only insofar as they were indices of a transmissible, multipliable defect. And it was with regard to this origin of behaviours, rather than the behaviours themselves, that the strategy was devised. Not poverty (which had itself only recently

become a ground for legitimate governmental action) nor crime (which had long been so) but mental condition; what an individual was in the depths of his soul (or rather, at this point, his intellect) had become a new object of judgment and of legitimate and compulsory social action.

The possibility of an extra-legal judicial instance had emerged, a medico-psychological instance capable of judging not what you do but what you are - or rather caught in a dilemma in that, whilst the attempt is to judge what you are, the only sign of this is what you do. For feeble-mindedness was a psychological state which was knowable only on the basis of the social behaviours which it induced. As Tredgold put it in his book:[57]

> the condition is a psychological one, although the criterion is social, and we may accordingly define amentia as a state of restricted potentiality for, or arrest of, cerebral development, in consequence of which the person affected is incapable at maturity of so adapting himself to his environment or to the requirements of the community as to maintain existence independent of external support.

Two linked propositions were entailed. What was at stake was a failure of adaptation; what underlay this failure, and hence what had become a legitimate object of scrutiny and intervention in its own right, was a mental condition. As the Report put it, feeble-minded criminals, inebriates, paupers, children of school age "are not so much prisoners, or inebriates, or paupers, or school children as persons who are mentally deficient."[58]

How was one to deal with individuals as persons who were mentally deficient? What was necessary first of all was a definition and classification of the degrees of deficiency, since it was on this basis that action must proceed. The Commission, in a spirit

reminiscent of the Ideologues, proposed to divide persons of unsound mind into nine classes "subject to be dealt with", within which mental defectives were distributed among four. Idiots, imbeciles and feeble-minded were classified according to a rising scale of social competence; 'moral imbeciles' were a discrepant class - persons who from an early age displayed some mental defect, coupled with strong vicious or criminal propensities on which punishment has little or no deterrent effect. Like the Minority Report of the Royal Commission on the Poor Laws, which warmly endorsed these proposals, classification and distribution were to provide the keys for the re-establishment of a regulated and orderly social regime, and scientific social administration was to operate through the affixing of unambiguous labels to previously floating groups of persons, thus allowing their appropriate location within a range of specialised forms of social provision:[59]

> We desire to promote the establishment of such institutions as are necessary for the classes which the different words of our classification represent; and we would prevent the sending of patients who, though differing in the extent of their defectiveness, are called by one name, to institutions unsuitable for them, as much as we would avoid the sending of such patients to suitable institutions under unsuitable names... Thus, the utility of a satisfactory nomenclature is largely administrative... Instead, therefore, of imbeciles, for instance, being treated in expensive establishments, they would be provided for economically as requiring little beyond employment, maintenance, shelter and control. And in consequence of a change of this kind, consistent alike with better nomenclature and more exact certification, institutions

and homes might to a larger extent be specialised; and asylums might become hospitals to a much greater extent than they are at present, thereby fulfilling an infinitely greater service to science and to administration.

Scientific knowledge and efficient administration were thus to feed off one another and each would repay its debt to the other by enhancing its objectives. Despite the endless debates over definitions which accompanied the passage of the 1913 Act, this schema, though limited to the four classes of defectives, was realised in a way which was to be denied to the programme put forward by the Webbs. And when distribution became dependent upon classification, the question of diagnosis, of ascertainment, obviously was the fulcrum of the whole system:[60]

> if the mentally defective are to be properly considered and protected as such, it is necessary to ascertain who they are and where they are, and to bring them into relation with the local authority.

Ascertainment required for its operation a knowledge and technique to enable individuals to be properly evaluated, and a class of agents and system of administration to carry out the job. This complex of agents, agencies, apparatuses and techniques which the Report's proposals entailed, was, in its ideal form, to spread out from a central point to the farthest reaches of the social body, bringing each individual into contact with the authorities, and simultaneously instituting a judgment as to their true nature. The 1913 Mental Deficiency Act called into being just such a complex and hierarchical structure of detection, ascertainment, supervision, distribution and institutional confinement which had the mental defective as its subject. A special mental deficiency committee in

each local authority area was to provide for the ascertainment of persons subject to be dealt with under the Act, was to provide suitable institutions, was to maintain the defectives it placed therein, to provide for the conveyancing of defectives to and from such institutions, and was to appoint officers to supervise the care of defectives in the community. This whole structure was to be under the watchful eye of a central body named (in terms which would gladden the heart of a radical sociologist) the Board of Control.[61]

As far as adults were concerned, the reaction of local authorities continually failed to live up to the desires of the Board. New institutions were slow to be built; the war intervened to direct energies and resources elsewhere; many local authorities failed to take their duties sufficiently seriously. According to Jones, by 1920, only 10,129 defectives had been ascertained, whilst the Board considered the true figure to be in the region of 3.55 per thousand of the population. By 1927, the number of defectives ascertained had risen to over 60,000; however, despite the urgency and necessity of immediate and permanent institutionalisation, many of these were being supervised in the community, and only 5,301 places in institutional accommodation were being provided by local authorities.[62] The Central Association for the Care of the Mental Defective (formed out of the National Association for the Care of the Feeble-Minded in 1914, and called, after 1923, the Central Association for Mental Welfare) continued to press for more adequate provision, in the pages of its journal Studies in Mental Inefficiency (called Mental Welfare after 1925). But by this time, as we shall see later in this study, the terms of the debate had shifted: with the emergence of the problem of welfare, indicated in the changes in name just referred to, the mental defective would no longer be the

key point of intersection of a knowledge of individuals and the administration and production of well governed populations.

But whilst for adults the problem of the mental defectives could be avoided at the administrative level, for children the case was rather different. For adults, ascertainment required the construction of a new and specialised apparatus; but children, since the 1870's, had been brought into daily contact with the authorities. And the place of this daily meeting was, of course, the school. The Elementary Education (Defective and Epileptic Children) Act of 1914 replaced the permissive Act of 1899 with one which imposed a set of duties on local education authorities, introducing into the school system a copy of the structure of detection, ascertainment, supervision, distribution and institutionalisation laid out in the Mental Deficiency Act of 1914. The question of the means available for ascertaiment had now become an urgent one. As Tredgold remarked in a new chapter on Mental Tests and Case Taking, which he introduced into the 1914 edition of his book, the result of this legislation was to increase the incidence of cases of the milder degrees of deficiency which the physician was called upon to judge:[63]

> consequently the diagnosis of mental defect will come to occupy a very important place in medical practice... the legal position of the mentally defective now renders it extremely advisable that such examination should be systematic and carefully recorded... [although mental tests are still in their infancy] there can be no doubt that the science is one which has a great future before it in the elucidation of the problem of mental development and the practical work of education... mental tests, if properly understood and applied, have a distinct value which it is impossible to over-rate. They supply us with definite information regarding defect and abnormalities of working which,

> when rightly interpreted, are of the utmost assistance to diagnosis, and they will be the means of carrying us on from that imperfect knowledge of the defective mind with which we have hitherto been compelled to be satisfied to a more precise and scientific knowledge of the subject.

A technique of mental measurement had become necessary. Let us consider the conceptual conditions which made it possible.

NOTES TO CHAPTER SIX

1 Burt, 1927, p5.

2 The description is that of Sir Robert Blair, Chief Education Officer, on Burt's appointment to a half-time post. Burt quotes it in his autobiographical account (Burt [1952] 1968, p64) where he puts it in Blair's scottish accent: "Young man, ye're the fust official psychologist in the wurrld, and ye've all London at yer feet. Now come back in a week and tell me what ye'r going to do." cf Sutherland and Sharp, 1980.

3 Burt, 1927.

4 Binet and Henri, 1896, translation from Herrnstein and Boring, 1965, p428.

5 Ibid, 431.

6 Royal Commission on the Care and Control of the Feeble-Minded, 1908, Vol 8, para 9.

7 Cf Searle, 1976.

8 Searle, op cit, tends to imply the former position; Barker, 1982 the latter.

9 There is no adequate account of the history of idiocy. Rosen, Clark and Kivitz, 1976 is a useful collection of source material. Kanner, 1964, and Wolfensberger, 1976, are fairly straightforward institutional histories. The work of Cranefield is useful in providing detailed material on very specific areas: cf Cranefield 1961, Cranefield, 1962; Cranefield and Federn, 1967. Other useful discussions are Kanner, 1967,1975; Haffter, 1968; Neugebauer, 1978 and Ryan and Thomas 1980, especially Ch 5.

10 Quoted from Matthews, 1954, p183.

11 Quoted from Jones, 1972, p183.

12 Cf Howe, 1848.

13 Eg Sidney, 1854; Millard, 1864; Anon, 1865. cf Jones, op cit and Ryan and Thomas, op cit.

14 Figures cited in Jones, 1972, p183; cf also Tuke, 1882, p310.

15 Cf Hilliard and Kirman, 1957, Ch 1.

16 Ibid.

17 Charity Organisation Society, 1877, p6.

18 Ibid, p7.

19 Ibid, p50.

20 cf Jones, op cit, p185.

21 As, for example, in the case of the Wild Boy of Aveyron, discussed in Chapter Three above.

22 Willis, 1672, cf Cranefield, 1961.

23 Howe, 1848.

24 Ireland, 1877.

25 Ibid, p254.

26 For example, in France, in the programmes of the Ideologues discussed briefly in Chapter Three above. For early English debates over the moralising function of education see Jones and Williamson, 1979. cf also Foucault[1975] 1977a, passim.

27 For the history of 'special education' in England, see Pritchard, 1963.

28 See Pritchard, op cit; for the history of special education for the 'maladjusted' see Bridgeland, 1971. cf also Donzelot [1977] 1979, p128 ff.

29 Royal Commission on the Blind, Deaf and Dumb, 1889, paras 709-724; discussed in Sutherland, 1977, p138.

30 See, for example, Shuttleworth, 1888; Charity Organisation Society, 1893.

31 Education Department (Defective and Epileptic Children) (Committee) 1895, vol 1, para 13.

32 Poor Law Schools (Committee), 1893.

33 Charity Organisation Society, 1893. cf Keir, 1952, p9, and Jones, 1972, p186. The COS also sponsored the formation of the National Association for Promoting the Welfare of the Feeble-Minded, in 1896, which we discuss presently, and collated information from such diverse bodies as the Metropolitan Association for Befriending Young Servants and the National Vigilance Society on the difficulties of feeble-minded girls and young men.

34 Warner 1888. The Scheme was reported in Warner, 1890, p142ff. Doctors continued to use the scheme for many years, and it was still included in the 16th edition of Newsholme and Kerr's School Hygiene, published in 1924.

35 Ibid, p659, cf Potts, 1982.

36 Warner, 1895 and 1896. cf also Warner 1897.

37 Cf Pritchard, 1963, pp 132-151; Sutherland, 1977, p138.

38 Education Department (Defective and Epileptic Children) (Committee) vol 1, para 14.

39 Ibid, vol 2, question 106.

40 Quoted in Sutherland, 1977, p139.

41 Cf Pritchard, op cit.

42 Lake, a London head teacher, had drawn up a record card for documenting the physical, mental and moral characteristics of his pupils in 1885,and apparently used a scheme of tests based on the work of Galton; cf Barnes, 1901. Sophie Bryant, Head-Mistress of Camden High School for Girls published the results of her 'experiments in testing the character of schoolchildren' in 1886 (Bryant 1886, cf also Cattell and Bryant, 1889) which, according to Keir, 1952, p8, had a wide influence. Sully had also stressed the importance of observation and recording of children's behaviour and ability in his Teacher's Handbook of Psychology, first published in 1886 and widely used in the training of teachers cf Keir, op cit. These questions are discussed further in Chapter Seven below.

43 Evidence to Royal Commission on the Care and Control of the Feeble-Minded, 1908. cf Sutherland, 1977, p139.

44 In her appendix to Lapage, 1920, p243 and p293.

45 Pinsent, 1903.

46 Ibid, p515.

47 Jones, 1972, pp 194-204 and Searle, 1976, pp106-111 give details of the campaign leading up to the passage of the Bill, and the positions taken up by the various forces.

48 Quoted in Jones, 1972, p196.

49 Tredgold, 1908.

50 Tredgold, 1910, p721.

51 Cf the accounts in Jones and Searle, cited in n47. For a contemporary discussion of the Act itself, see Davey, 1913.

52 Royal Commission on the Care and Control of the Feeble-Minded, 1908, Vol 8, para 19. cf also Fry et al, 1909.

53 Loc cit.

54 Ibid, para 553.

55 Tredgold, 1914, p19.

56 Op cit, n52, para 19.

57 Tredgold, 1914, p8.

58 Op cit, n52, para 191.

59 Ibid, para 556.

60 Ibid, para 19.

61 Full details of the Act are given in Wormwald and Wormwald, 1913, and in Jones, 1972, pp 204-209.

62 Jones, 1972, pp 212-214.

63 Tredgold, 1914, pp 359-361.

CHAPTER SEVEN

MEASURING AND ASCERTAINING

In this chapter we trace the trajectory which led to the formation of a test of intelligence and its deployment in a practice of ascertainment. We examine the struggle of individual psychology to constitute itself as an autonomous clinical instance around the problem of the ascertainment of mentally defective children. And we consider how it was that the psycho-eugenic strategy was defeated, and its role severely delimited, by an opposing neo-hygienist strategy promoted by doctors.

Measurement and discrimination

> the object of the quantitative experiment is to measure... What we do is to carry out a long series of observations under the simplest and most general introspective conditions. Then we gather up the results of these observations in mathematical shorthand, and express them numerically by a single value. The questions asked of consciousness are, in the last analysis, two only: 'Present or absent?' and 'Same or different?'
>
> Edward Titchener, 1901-5[1]

From Gustav Fechner's psychophysics to Edward Titchener's textbook of experimental psychology, psychological measurement operated upon the model of the experiment. It concerned a space bounded by the stimulus, the sensation and the reaction; its object was the formulation of the general laws of experience. To be adequate to the

task of classification, measurement would have to leave the closed space of the body and the artificial territory of the laboratory. It would have to relinquish the quest for indexical measures in search of distributional rankings. It would have to concern itself not with the laws of the relation between body and soul but with the classifications of the behaviours and abilities of individuals with respect to social norms. And it would have as its object not the formulation of general laws of consciousness, of that which is common to all humans, but differences amongst individuals within a population. Only then would a psychology of measurement be able to establish itself in the space which had opened up for it in the apparatus of social administration.

Gustav Fechner published the Elemente der Psychophysik in Leipzig in 1860.[2] Psychophysics was formed at the intersection of two sorts of questions. Firstly, what was the relationship between matter and mind, between body and soul? And secondly, if every science must proceed by establishing the laws which express quantitative relations between objects, was mind adequate to a scientific knowledge, could the soul be measured? Psychophysics operated within this space, and its laws and measurements thus concerned a domain internal to the subjects it studied. It was to be, in Fechner's words, "the exact theory of the functionally dependent relations of body and soul, or, more generally, of the material and the mental, of the physical and the physiological worlds."[3] The quantitative relations which psychophysics sought to determine were thus those between the stimulus and the sensation, and the laws which concerned it were the general laws governing this relation.

This too was the space in which Wundt's analysis of the

elements of consciousness operated, and which the measurements he carried out in his psychological laboratory at Leipzig concerned. Break down experience into its constituent elements through introspection; relate these elements to the measured stimuli that evoke them under stated conditions; measure the quantitative relation between stimulus and experience; develop the general laws of these relations and of the combination of the elements into complex unities. Hence Wundt measured the senses, especially those of vision and hearing. He measured reaction time: the period spanning the stimulation of the sense, its presence in consciousness (perception), its identification, appropriation and synthesis by the subject (apperception) and the reaction (an act of will). He measured the smallest noticeable difference between stimuli. And he measured associations between words. But all his measurements and analyses operated within this space bounded by the stimulus, the experience and the reaction. Thus Wundt was forced to make an absolute separation between the sphere of objects, problems and concepts proper to experimental psychology and those proper to the social field, which must be the concern of the quite discrete knowledge of Volkpsychologie.[4]

It was not, of course, that the question of individual differences was not thinkable in these terms. Indeed Galton himself had made observations on differences in sensitivity and discriminatory ability and tried to relate these to differences in intellectual ability:[5]

> The trials I have as yet made on the sensitivity of different persons confirms the reasonable expectation that it would on the whole be highest among the intellectually ablest... The discriminative faculty of idiots is curiously low; they hardly distinguish between hot and cold and their sense of pain is so

obtuse that some of the more idiotic seem hardly to know what it is.

And both Galton and James Sully, from the mid 1880's onwards, had urged that large-scale surveys be carried out on physical, sensory and mental differences, especially in children, and had suggested that such surveys might provide information of use to education. Keir, reviewing the history of the Child Guidance Movement, to which these proposals were related and which we will discuss in more detail later, summarises Galton and Sully's reasons thus: "we need more accurate information (i) about the average or normal characteristics of children at successive stages of life, (ii) about the approximate number of cases needing special attention, special treatment, or special types of school, and (iii) about changes in mental and educational level from year to year or from one generation to the next."[6] Some of the ways in which evidence from such surveys was deployed in relation to mental deficiency have already been discussed. But as important was the development of detailed knowledge about individual children, and the development of methods of assessment of their abilities and qualities.

The British Child Study Association was established by Sully in 1893 with the support of teachers and educationalists:[7]

> One of its primary objects was "to urge the importance of making a scientific study of individual children by psychological, sociological and anthropometric methods." For this purpose, it was stated, "we believe it of first importance to develop methods for the direct assessment of intellectual, emotional and moral qualities, instead of relying on indirect inferences from physical characteristics"; "it is essential to study the normal as well as the abnormal, paying special attention to the

investigation of the commoner causes of minor deviations among normal children, as well as to the diagnosis of the rarer abnormal or pathological types."

But it was precisely these 'direct' methods which proved so difficult to conceptualise. This is evidenced by the assessments which were carried out in the laboratories of Galton and Sully themselves. Galton opened what he then termed an 'anthropometric laboratory' in 1884, as part of the International Health Exhibition.[8] Parents were charged a nominal fee for their children to have their 'powers' measured and recorded on an individual case history sheet. This was a sort of contractual arrangement, made directly between scientist and parents, in which the latter, in return for allowing their progeny to become objects of scientific knowledge, obtained informtion as to their abilities or warnings as to faults which might be put right. But this direct exchange was to be short lived.

In 1896, three years after his appointment as Professor of Mind and Logic at University College, London, Sully opened what was the first exclusively psychological laboratory in England. He had William McDougall first as his assistant, then as Director of the Laboratory from 1899 to 1907, when McDougall resigned to allow Spearman to take up this position. Galton and Sully both saw this laboratory as a prototype of a form of institution which could be set up throughout the country. This institution was to operate in connection with the schools; hence its difference from the direct relationship with parents which Galton's first laboratory offered. The family - child - school - psychologist configuration was a very productive one, and we will discuss it further in a later chapter. But here let us concentrate on what went on in the University College Laboratory. Here too, parents were cut out of the relation, or

rather were present only as mediated through the school and the child. Teachers were to bring to the laboratory their problem children, those pupils who were proving 'difficult', and there they would be examined and experimented upon by the laboratory's psychologists.

We can see again here that peculiar arrangement which we encountered in Chapter Three. In a sense, all those subjects of investigation in the psychological laboratory were little wild children, Victor's siblings. And these children, like Victor, were caught up in a process which simultaneously sought to extract knowledge from them - to make them answer up as to the nature of their mental processes - and to make them the objects of reform - in that this knowledge was to be turned to account in technical operations to change, develop or reconstruct these processes. The happenings in the laboratory were observed by students of psychology or education, so children made their own contribution to the furtherance of pedagogy, even if not their own. But in return, teachers received a report on the mental and physical characteristics of the child with suggestions as to treatment which might be appropriate for the reformation of undesirable aspects.[9]

The relations established between psychologists and teachers, independent of doctors or at least at an oblique angle to them, would be very important for the attempt to construct a relatively autonomous practice of 'clinical' psychology. This was to be a psychological knowledge and technique which organised itself around its subjects as cases, and utilised its knowledge within a technique of the cure, but which was organised independently of the clinical knowledge, practice and techniques of medicine. But despite the possibilities of these relations, and despite their role within the training of teachers, psychological methods of assessment were unable

to leave the laboratory before being radically transformed. To see why, let us look again at psychological conceptions of intelligence and its measurement.

For the psychology of individual differences to be able to affix itself to the institutional demand for the assessment of individuals, a shift would have to occur away from the rationale which guided psychophysics, a shift of both the object and the form of calculation. The move was, first of all, from the investigatory rationale of the experiment to the adjudicatory rationale of the test. The term 'test' was first introduced into psychological discourse rather unassumingly in a paper written by James Cattell and published in Mind in 1890. He still employed it in the context of the laboratory:[10]

> Psychology cannot attain the certainty and exactness of the physical sciences, unless it rests on a foundation of experiment and measurement. A step in this direction could be made by applying a series of mental tests and measurements to a large number of individuals. The results would be of considerable scientific value in discovering the consistency of mental processes, their interdependence, and their variation under differing conditions.

So the idea was that you measured individual attributes on a range of different tests, and you measured a lot of different individuals, and thus you could not only establish individual differences but also see how these were ranged in the population, and how any individual fitted within that range. We can see how the object of the application of measurement has changed from psychophysics. Measurement does not examine the capacities of a number of individuals with a view to establishing some general law

true for all, but focuses upon the particular combination of functions in each specific individual in relation to their distribution and variation across the population, with a view to establishing the parameters of individual differences. At this point we are close to the modern notion of a psychological test, but there is still some distance to go.

Whilst the technique of the experiment focused upon the individual only to the extent that he could supply data which would allow the formulation of general laws, in the practice of the test, measurements were made of individuals with a view to pronouncing a judgment upon them in comparison to some other individual or the general population of individuals. The displacement of the object of measurement marked by the emergence of the test allowed two complementary alliances to be formed. Firstly, an alliance with statistical techniques which allowed the mathematical analysis of variations between individuals in a population. Secondly, an alliance with technical operations of classification and distribution of individuals on the basis of their relations with other individuals in the population. But it was the demands of administration rather than the hesitancies of science which forced the combination of these two alliances, and hence revealed the true utility of the test. This came about because of two challenges which were posed to the psychological conception of intelligence and its measurement. On the one hand, a challenge which consisted in the nomination of medicine as the adjudicative instance in the assessment of the feeble-minded. And on the other hand, a challenge contained in the development and utilisation of the Binet test as the means for this assessment.

If individual psychology in England was initially unable to fulfil its task as the knowledge competent to pronounce on questions

of intellectual ability, this was, paradoxically, at least partly because of the eugenic strategy in which it was caught up for its first two decades. Why was this an obstacle? It was an obstacle because individual psychology sought to adjust its techniques of measurement not simply to the externally variable conducts and abilities of individuals assessed, but also to some common, underlying, heritable and hence biological substrate of these behaviours and abilities. With admirable rigour, it continually sought to reconcile the exigencies of social judgments of abilities with the faculties of the sensory apparatus as measured by the technical devices of psychophysics. Hence the schema of tests which Cattell proposed differed but little from those utilised by Galton in his anthropometric laboratory. They ranged from bodily measures such as dynamometer pressure, through such classical psychophysiological measures as least noticeable weight difference, to "purely mental measures" such as the number of letters remembered at one hearing.[11] This was still a long way from the "direct" measures of assessment desired by the British Child Study Association, or, rather, it was caught in a particular conception of what a "direct" measure must look like.

Between the senses, which it was necessary and legitimate to measure, and behaviours, upon which it was necessary to adjudicate, only statistical devices exist to commensurate the incommensurable. When Cattell's paper was published in 1890, it was followed by some remarks by Francis Galton. Galton expressed great interest in Cattell's proposals, but considered that they would only achieve their goal of differentiating individuals if the measures made by Cattell were correlated with "an independent estimate of the man's powers", for example "mobile, eager, energetic, well shaped...".[12] It was towards the problem posed by these remarks that Spearman's

famous paper of 1904 on '"General intelligence" objectively determined and measured' was directed. Spearman recognised that all previous attempts at psychological measurement had failed in this respect: they had been unable to show any relationship between the measures they obtained and the abilities of individuals in their ordinary life. Indeed, they had even failed to demonstrate any relationship between the values on the different measures used for any one individual. And these criticisms applied not only to measurements of simple sensory properties, but also to Binet's attempts to measure complex mental functions.[13] Spearman's well known solution, using complex correlational techniques, was to propose a two factor theory of intelligence, comprising a central and fundamental function of general intelligence, which acted in common with specific intelligences to produce the abilities which individuals demonstrated in particular tasks.

Spearman obtained measures of his samples of Harrovian schoolboys with regard to their discriminatory abilities on weight, sound and vision, and employed a development of the statistical methods of Beauvais, Galton and Pearson in order to correlate these measures with independently obtained rankings of these children in order of intelligence. This enabled him to forge statistically the link between these sensory abilities and the pertinent behaviours, in the manner that has been utilised throughout the whole subsequent history of psychological tests of intelligence. The independent rankings of intelligence were obtained from the order in which the children were placed by their school results, by their teacher, by a fellow schoolboy and by the Rector's wife (who, Spearman regretted, could only provide an incomplete list) The circularity of this procedure, its assumption of the forms of differentiation and of a

unilinear distribution of individuals in the population according to mental powers which it claimed to demonstrate - all these are by now familiar criticisms and ones which are not pertinent for our purposes here. What concerns us are the consequences which followed from the fact that Spearman considered his statistical manoeuvres to have demonstrated that "the common and essential element in the Intelligence wholly coincides with the common and essential element in the sensory functions."[14]

Two things had happened here which allowed this discourse on intelligence to be situated within a eugenicist strategy. Firstly, the measurement of intelligence had become a question of differentiating beween individuals in terms of the position which they occupied in a linear series. This linear series was a measure of some characteristic which could be regarded as having a continuous distribution with a pattern which followed the normal curve. Intelligence thus unified could be treated according to the statistics of large populations, in which individual scores received their pertinence from the perspective of the population and their relation to its norms. And second, intelligence could be conceived in terms of the links beween the outward and visible effects (behaviours, performances) and an internal and biological cause (sensory functions). It was thus entirely consistent that Burt's attempt to extend and develop Spearman's work, in his investigation of the intelligence of Oxford schoolchildren from schools of differing qualities should have been undertaken at the instigation of William McDougall, who could then celebrate the results a few years later in a paper entitled 'Psychology in the service of eugenics':[15]

> we must regard [Spearman's and Burt's finding] as one of the greatest importance for eugenics; for we have discovered a measurable factor which is involved in, and is an important

factor or condition of proficiency in, many mental operations; a factor which is possessed in very different degrees by different individuals.

McDougall chaired a sub-committee of the Anthropological Section of the British Association which was set up to consider the gathering of psychological measurements as a part of a scheme for a comprehensive survey of the population which had been proposed in 1905.[16] The drive to measure was undoubtedly produced within the debates over physical and psychological deterioration which have already been discussed. This was true also of the recommendation made by the Board of Education in 1907 for 'anthropometric observation of children in schools' which, according to Hearnshaw, greatly facilitated Burt, Flugel and English - whom McDougall recruited to assist him with construction and standardisation of tests - gaining access to school-children for testing, in Oxford and later in Liverpool and elsewhere. In this great labour of quantification of attributes, a new kind of knowledge of the population was being constituted, not simply of its gross characteristics and crises - births, deaths, marriages, illnesses - but also of its more quotidian aspects. As we have seen it was by no means simply, or even principally, in a eugenic strategy that such information functioned. But in the case of the English elaboration of a psychology of intelligence, eugenics certainly did establish the field from which the problem was posed.

As has already been pointed out, the importance for eugenics of establishing something like a factor of general intelligence was the demonstration of a biological, variable, heritable basis for mental characteristics. Spearman recognised this, and explicitly allied his conception of general intelligence with Galton's earlier notion of a

variable and heritable vital energy, which underlay and made possible labour and all the robust virtues.[17] Burt stressed a similar theme when he argued in relation to general intelligence:[18]

> we may eventually seek the psycho-physical basis, underlying this capacity, in a particular characteristic of general neural constitution; the accentuation of such a neural characteristic would then produce the type of mind known as intelligent, while its biological inheritance would form the condition of the transmissibility of the mental trait.

But although this psychophysiological basis was not yet specifiable, the demonstration of the innateness of general intelligence, once that has been given a precise definition, could serve the same function:[19]

> Once devised, once demonstrated to measure a general innate endowment, as distinguished from special knowledge and special dexterities, that is to say from post-natal acquisition, such tests will find yet a third direction for experimental investigation, namely the enquiry how far the capacity thus measured varies with Age, with Education, with Parentage and with Social Rank; and this further application of the methods of the 'tests' would provide at once an illustration of their practical importance and a corroboration of their theoretical validity.

Burt's claim to have demonstrated the innateness of general intelligence has recently been subjected to much critical comment, and much publicity has been given to the 'scandal' of his fabrication and judicious adjustment of his data.[20] These are not questions which concern us here. What is at issue is not a solitary and

regrettable aberration, but the formation of a regular and systematic explanatory structure in the eugenics-intelligence couple, which made the claims of certain arguments so strong as to require rather little in the way of justificatory evidence. This, for example, is how Hearnshaw formalises the argument which Burt puts forward in his article of 1909 for the innateness of intelligence:[21]

1 Bishops are brighter than butchers (obviously).

2 The sons of bishops are better at dotting and other similar tests than the sons of butchers.

3 These tests correlate highly with intelligence as judged by teachers.

4 These tests do not depend on prior experience and performance does not improve with practice, or on retesting after 18 months: therefore they must measure innate capacity.

5 The class differences cannot be accounted for by environmental deprivation, since the butchers could afford to pay 9d per week in school fees.

6 Therefore, we may conclude that the superior proficiency and intelligence of the bishops' boys is inborn.

(Population: N=43; 30 lower middle class; 13 upper class).

This argument may indeed be guilty of the sin of petitio principii but we can see that it was not merely a case of faulty reasoning: the premises which contain its conclusions are fundamental elements of eugenic discourse. The postulation of a unitary function of intelligence, biologically based and innate, eminently inheritable, a common basis to all the attributes and qualities of the individual, was merely a reworking of themes which had been familiar since the

publication of Hereditary Genius. It was not surprising therefore that Burt explicitly returned at the end of his article to the very terms of Galton's eugenic reutilisation of Booth:[22]

> we seem to have proved marked inheritability in the case of a mental character of the highest "civic worth".
>
> Parental intelligence, therefore, may be inherited, individual intelligence measured, and general intelligence analysed; and they can be analysed, measured and inherited to a degree which few psychologists have legitimately ventured to maintain.

So a method of assessment appeared to have been devised which would allow the discrimination and ascertainment required by the demands of administration. And underpinning this technique was the link which Galton had forged at the moment of conception of the psychology of the individual, and which, indeed, established the very possibility of its existence. This was the link between statistical norms of population variation and social norms of conformity to required standards of conduct. Individual psychology would seek to diagnose social pathology in terms of deviation from statistical norms. Its conception of normal and abnormal mental functioning would be constructed from the point of view of a theory of populations, averages and correlations, not from a conception of the psyche itself. And similarly, methods of assessment would select their contents on the grounds of their ability to reproduce statistically a pre-determined social categorisation and distribution - items being included only if they permitted a distinction between individuals which accorded with that already made on educational, moral or judicial grounds. The psychology of the individual was destined from the outset to construct its theoretical object in terms

of norms of statistics and social adaptation rather than in terms of the normativity of psychic functioning. No wonder it was to become not so much a clinical as an administrative practice.

Yet despite the link it forged between social requirements and psychological assessments, despite its certainty of the possibility of assessing intelligence through the measurement of sensory functions, and despite the corollary that psychologists possessed the rights and capacities to adjudicate in cases of suspected pathology of the intellect, these claims fell on deaf ears as far as administrative procedures for diagnosing the feeble-minded were concerned. Not that diagnoses were not being carried out. But the procedures were not being operated by those versed in psychology but by doctors, and the technical device utilised was not based upon the assessment of elementary sensory and motor functions and their statistical treatment but was a test of a very different type.

We can trace this clearly if we examine successive Reports of the Chief Medical Officer of the Board of Education. By 1909 the question of the diagnosis of feeble-minded schoolchildren was already causing problems to School Medical Officers. The Chief Medical Officer included in his report a schedule for the examination of children in respect to this difficulty. This included not only tests of motor ability, sensory responses, emotional balance and will-power, but also "tests of intelligence" involving the description of pictures, counting ability, handwriting tests and so forth. Now the form of argument within which all this was posed was not eugenic; it was that adopted in the Report of the Royal Commission discussed earlier. The Chief Medical Officer urged School Medical Officers on with the assurance that the task of ascertainment was vital in order to allow the feeble-minded to contribute to their own support, to save them from harsh treatment on the streets, to prevent them

becoming drunkards, criminals and prostitutes and from giving birth to children who would certainly grow up to be a burden on the community.[23]

In the Report of 1910, a further familiar theme was deployed. The Chief Medical Officer advocated an organisation for the ascertainment and allocation of feeble-minded children in terms familiar from the Minority Report of the Royal Commission on the Poor Laws, when he remarked that "the Day Special School is an indispensable agency both as an 'observational centre' and a 'sorting house'", a place where children could be tested, classified and distributed to the appropriate place amongst a range of specialised agencies.[24] The Report concluded with a plea for:

> (a) more accurate and useful classification, including the differentiation of the educable from the ineducable and the appropriate grouping of the children according to the nature of the education from which they may be expected to profit;
>
> (b) a more practical, manual and industrial training...
>
> (c) more effective and vigilant after care... ; and
>
> (d) power to establish and assist residential institutions for providing custodial care for all ineducable feeble-minded children...

It was within this familiar strategy of classification, distribution, socialisation or segregation that, in the Report for 1911, the "psychological and educational tests associated with the name of Binet" were introduced for the first time into the recommended schema of tests.[25] It was now not so much the physical examination, though this still occurred, nor any of the other assessments, but intelligence which had become the fulcrum of adjudication, and intelligence had become what the Binet and Simon

test measured:[26]

> in assessing the intelligence, however, which is, broadly speaking, the chief criterion for differentiation of the normal child from the feeble-minded, the mental tests designed by Binet and Simon are recommended.

When the passage of the Mental Deficiency Act stabilised the administrative structure in the form it would maintain for many years, the Binet tests retained their central place in a versatile apparatus for the production and utilisation of scientific knowledge of intelligence and its pathologies:[27]

> The passage of the Mental Deficiency Bill into law cannot fail to give a great impetus to the study, diagnosis, classification, educational treatment and care of children suffering from mental defect... It is for [Local Education] Authorities and their Medical Officers to lay deep and broad foundations for the new work of grappling with feeble-mindedness in the State... [The compulsory ascertainment and notification of mentally defective children] is the essential first step in a scientific and national effort to eradicate the evils of feeble-mindedness.

And the Chief Medical Officer reincluded his assessment schedule in the Report, and stressed that "In association with this schedule should be used the Binet-Simon method of testing the intellectual age of the child".[28] For the purposes of the administration of children on the grounds of intellectual ability, the mental age calculated from these scales had become synonymous with intelligence. Why should the Binet-Simon tests have succeeded in the hands of the doctors, while the psychologists and their measures failed to occupy the space they considered theirs by right? To resolve this question, let us consider briefly the formulation of these tests in France.

Like Galton, Binet from the outset considered the study of individual differences to be central to the construction of a scientific psychology. But unlike Galton, he eschewed any attempt to forge direct links between elementary sensations and individual abilities. Whilst the postulation of such links was, as we have seen, fundamental to any eugenic argument, Binet was not so constrained and moved directly towards the measurement of complex cognitive functions.[29] This object of measurement immediately dictated a different form of measurement from that appropriate to the elementary sensory functions. Binet's measurements sought to bear upon psychological faculties directly, though measurement of these faculties still required a comparison between various accessible indices of mental functions on the one hand and independent assessment of the relative abilities of individuals on the other. The indices of mental functions that Binet used were partly physical and anthropometric: cephalometric studies, graphology, indeed any measure of this type which could provide a measurable range of differences between individuals. However, whilst such measures were compatible with those utilised by the British eugenicists, Binet's measures of mental functions were not. These included assessments of mental images, of imagination, of attention, of aesthetic sentiment and so forth.[30] But after ten years of work on this project, little had been achieved in the way of any straightforward means of assessing individual differences in intellectual ability. Claparede, reporting on this work as presented by Henri at the First German Congress for Experimental Psychology in Giesbach, stated:[31]

> The experiments made since [the 1895 programme] in the schools have shown that it is premature to look for tests permitting a

diagnosis during a very limited time (one or two hours), and that, much to the contrary, it is necessary to study individual psychology without limiting the time - especially by studying outstanding personalities.

Sustained research had led to the failure of attempts to arrive at a brief measure for assessing individual differences in intellectual ability. Binet and his co-workers recommended instead lengthy and systematic investigations of particular individuals. There seemed therefore, to be a division between the exigencies which administration imposed and the methods dictated by a serious scientific attempt to establish a theory of intelligence, produce the means of assessing it, and allow discrimination between individuals on the basis of such an assessment. Yet just thirteen months later the first metric scale of intelligence, consisting of only thirty items, was published in L'Annee psychologique.[32] How can this sudden transformation from failure to success be understood? Was it perhaps a sudden upsurge of creative genius which was responsible for this remarkable leap forward in scientific techniques for the psychological assessment of intelligence? On the contrary, what happened first of all was a consequence of a shift in the way in which the question of intelligence was posed. Beaunais commented upon this when he first announced the invention of the test, reading a paper by Binet and Henri at the First International Congress of Psychology in Rome:[33]

> The two authors of the present note have especially preoccupied themselves with methods that could be used to make the distinction between normal and abnormal children... methods that will permit a clinician to separate the subjects of inferior intelligence into categories verifiable by all; and second, that

will permit commissions who decide on the admission of children into special schools to make an exact distribution.

The condition for the formation of the test of intelligence was the prioritisation of the question of discriminating between the normal and the abnormal over the attempt to ground a measure of intelligence in psychological conceptions of mental faculties. And the prioritisation of this question was forced in France by the imposition of universal and compulsory schooling. For in France, just as much as in England, this move filled schools with numbers of recalcitrant children who were ill suited to the rigours and disciplines of the school, and unable to fill the role of subject in the pedagogic technology of the normal classroom. The leading strategy in France with regard to the feeble-minded was a philanthropic one, and Binet was a central figure within it. As a key member of the Society for the Psychological Study of the Child, Binet was involved in the demand that government must fulfil its legal responsibilities by extending the benefits of education to <u>all</u> children. Not just pity but duty and social justice meant that this must include the mentally defective.[34]

In 1904 the Ministry of Public Instruction appointed a Ministerial Commission for the Abnormal, the French equivalent of the Committee on Defective and Epileptic Children. Binet and three other members of the Society for the Psychological Study of the Child were among its members. The Commission was not successful in its principal task, which was to discover the number of abnormal children in France. The problems of definition and diagnosis produced such variation between the verdicts of the teachers who were doing the classifying that the information which was obtained provided no basis for useful conclusions. Nonetheless the Commission, which confined

its activities to administrative and pedagogic questions, did recommend the use of a "medico-pedagogic examination" in the diagnosis of abnormality, but "could offer no criteria for methods to be used, observations to be taken, questions to be posed, or tests to be originated."[35] Binet and Simon thus turned their attention to this practical task; not the theoretical problem of devising a means of measuring intelligence in terms of the distinct faculties of the mind, but the practical task of devising a means of classifying individuals into one or other of a very limited number of categories. Wolf, in her biography of Binet, comments "soon afterwards came that flash of understanding that allowed him to see that an effective test must be oriented to 'tasks of behaviour' rather than to so-called faculties."[36] It was not the theoretical distinction of intellect into its different aspects and parts which was involved here, but the ranking of individuals as a whole in relation to their fellows according to the actual abilities and behaviours which they manifested in their everyday activities and which were pertinent to their educational progress.

Binet was not isolated in this recognition. The study of complex mental functions through the notion of faculties is more amenable to a reintegration into the direct assessment of behaviours than is the eugenically organised insistence upon biologically given sensory functions. So it was not a case of a unique concatenation of events which, when synthesised by an investigator of brilliance and creativity, allowed a definitive break with an old paradigm. It was the strategic intersection at which Binet was located, the intersection of a particular conception of the psyche and a specific administrative demand, which made possible the shift to the unilinear assessment of behaviours in terms of a single and simple numerical measure. The work of Blin and Damaye, for example, presented in

L'Anee psychologique in 1908, utilised a simple questionnaire to children using a range of tasks - reading, writing, arithmetic, general knowledge questions and so forth, and provided their results in terms of a single number on a scale from zero to one hundred, with suggestions as to which scores indicated particular levels of retardation.[37] Damaye wrote of this procedure:[38]

> The different faculties are thus no longer studied separately, in an experimental dissociation, we can even say dissection, but instead in their observable behaviours and according to popular and varied notions... The method appears to us to have a completely clinical character.

Binet's scale replaced the apparent arbitrariness of the Blin-Damaye procedure in many respects; perhaps the most significant being the role which age was allowed to play in the ranking of individuals. The comparison of idiots with young children in their abilities and behaviours was, of course, not new, but Binet reworked this in a way which was made possible by the existence of the institutions for which his procedures were designed. The observation of large numbers of children of similar ages in schools, and of large numbers of defectives in institutions, allowed the formulation of a double relation - firstly, despite individual variations, norms of performance could be established for children at particular ages, and second, defective children of particular ages could be seen to bear a striking resemblance to normal children some years younger. Whilst Binet refused to commit himself to an explanation of mental defect as an arrest of normal development, in pragmatic terms he recognised that the combination of these two arguments could lead to a classification of children in terms of a single measure - mental level - which, when compared with their chronological age, would give

a simple indication of the degree of their defect. The virtue of such a criterion was all the greater in that it related directly to the field of problems into which it was inserted: the norms and expectations of the schools as to the performance of children of different ages in the classroom.

This was the crucial shift marked by the invention of the Binet-Simon scale - from measurement of faculties operating within a space internal to the subject, to the examination of behaviours in which measurement was concerned with the subject as a whole, and from the point of view of his or her ability to perform in relation to social norms. Behaviour was the link between the measurement of subjects and the administration of individuals; it was the common point upon which they are articulated. Yet in this alliance, intelligence, as that which the test measured, had initially a rather precarious status, a role limited to that of practical utility. Binet recognised at the outset that the problem to which his test of intelligence was an answer was not that with which he had struggled for so long. He did not believe that what he was measuring as intelligence in this new device was what he had been attempting to measure in his detailed studies of his two daughters and in his extensive observations and experiments upon children. Thus in Les Enfants anormeaux Binet and Simon stressed the utility of the test as an administrative device; they subtitled the text "a guide for the admission of retarded children into special classes."[39] They constantly emphasised the limitations of the test: its criteria were not theoretical but educational; it was to serve only as a first means for the teacher to use in singling out children who might be mentally backward for further detailed investigation by a number of experts; the test itself was only a guide and was never definitive.

Yet at the same time as recognising these limitations - the test was merely a tool of administration - the authors were constantly beguiled into wishing to establish its claim to be something more. The test held a potent promise in its ability to transform previously unmanageable attributes into assessable, calculable quantities.

The first extension was from the pathological to the normal. What was originally a device for diagnosing the defective became a device for hierarchising the normal. The reference which the condensation of behaviours into a single number appeared to make to a hidden quality of the individual, together with the norms of development which provided the standard of assessment of deficiency, made it easy for the test to be extended beyond its initial point of emergence. By 1908 the test had changed its title - from "new methods for the diagnosis of the intellectual level of the abnormal" to "the development of intelligence among children."[40] Mental deficiency, hidden within the psychological domain, beyond recognition by visible signs, physical stigmata or anthropometric indices, had provided the route for the formation of a psychological conception of intelligence and a technique of assessing it appropriate to every child. The abnormal had provided individual psychology's route to a knowledge of normality, a means to assess the truth of the potential of every child. It was in relation to the question of the abnormal that a psychology of individual differences was established, and that a psychological conception of the normal was itself fixed and defined. Indeed Binet and Simon showed this ambition when they presented the test in its first crude form:[41]

> When the work only sketched out here becomes definitive, it will permit the solution of many current questions, since it is no less a matter than the measurement of intelligence... permitting comparisons not only according to age, but also according to

sex, social conditions, race, intellectual status... and normal and criminal anthropology.

Despite the apparent virtues of the Binet-Simon test, its brevity, the simplicity of the calculations it entailed, the convenience of the result it provided, its direct orientation to pertinent educational norms of behaviour and performance, it made a very limited impact in France on its first publication. This was so even with the Ministerial Commission for the Abnormal. However, according to Wolf, its utility was immediately recognised elsewhere. She quotes, for example, from an article of 1907 by Decroly, Director of a Brussels institute for the retarded, and his assistant Degand:[42]

> Despite some faults and flaws, we are persuaded that these tests can already render service in making classifications of pupils for a school or classes in special training... Thus we advocate their immediate use from the beginning of the school year to reduce trials that are harmful to both students and their teachers.

And indeed, after the 1908 revision of the scales was published there was little doubt that the test, now oriented to assessing the intelligence of all children, would come to define conceptions of intelligence and the means of measuring it for many decades - revised, restandardised, extended and modified but in its essence unchanged. The production of a simple numerical result was one advantage; another was that:[43]

> it runs its course according to an unvarying plan, it takes express account of age, and it assesses the responses by comparing them to a norm that is a real and living average.

By 1909 Binet was explicit about the central feature of his

test, the fundamental reason why it could occupy the place it did in the structure of educational administration - that what it measured was adaptation:[44]

> We predict a new method for measuring the phenomena of consciousness; instead of measuring their intensity, which has been the vain and foolish ambition of the psychophysicists, we shall measure the useful effects of acts of adaptation, and the value of the difficulties overcome by them; there is here a measure that is not arithmetical, but one that permits a lineal seriation, a hierarchy of acts and of different individuals judged according to their effectiveness.

A measure of adaptation which allowed the serial ranking of individuals according to the effectiveness of the adaptations to norms which they demonstrated - could there be a clearer characterisation of the psychological conception and measure of intelligence which had now formed? Only one last hesitation remained - Binet's unwillingness or inability to combine together the elements of chronological age and mental level into a single figure. This would allow a characterisation of intelligence in terms which provide for comparisons between as well as within age bands, for the summing up of the mental powers of an individual in a single figure which would tell those who wanted to know all they needed to know about them.

Although William Stern expressed some of the same anxieties as Binet when he published his paper advocating the combination of mental age and chronological age into a single mental quotient, the recognition of the potential of this figure by far outweighed these hesitations:[45]

> Now mental age must not, of course, be thought of as an

> absolutely unequivocal determination of a subject's intelligence, but only as a very rough quantitative characterisation of its value, without any implication as to qualitative differences, because one and the same mental age can be figured from the most varied sorts of distribution of passed and failed tests. But this very thing appears to constitute an advantage, rather than a disadvantage of the concept of mental age, for it gives expression to a fundamental psychological fact... there never is a real phenomenological equivalence between the intelligence of two persons: what we do have is rather a teleological equivalence - when measured in terms of the single function of all intelligence, namely, adaptation to new requirements... The full significance of [mental age] is disclosed only when we consider it in relation to other circumstances... Doubtless the most significant is the relation of mental age to the actual chronological age of the subject, for, as already said, a certain mental level goes normally with a certain age, so that the relation of mental to chronological age indicates the amount of discrepancy between the intelligence present and that required (in the sense of a norm to be expected), and in this way affords an expression for the degree of the child's intellectual endowment.

Perhaps it is true, as the familiar criticism goes, that with the invention of the Intelligence Quotient, intelligence has become no more than 'what intelligence tests measure'. But one must also recognise that with the concept of IQ what has happened is that social norms and expectations are internalised both within the theory of intelligence and the technique of its assessment. The test is not merely suited to the administrative demands placed upon it because of

the cultural bias of the test items, or the dependence of performance upon experience, but because of its ability to produce a single numerical measure of an individual's adaptation to social requirements. The virtue of the Binet-Simon test was its tacit recognition that for individual psychology to enter the space where it could become an effective and functioning social knowledge, it would have to concern itself less with the laws of an internally organised mental domain than with the laws of the adaptation of the subject to social and pedagogic exigencies, and with the techniques of administration of individuals in respect to the alignment or non-alignment of the registers of the mental and the pedagogic.

It was for these reasons that it was the Binet-Simon test which first provided the technical means of discrimination and ascertainment of feeble-minded children in England. And no doubt the opposition of the English eugenic psychologists to this technique was in part responsible for their failure to obtain the position of adjudicating agency in respect to these questions. For, as we have seen, despite the non-medical nature of the criteria which were being used for ascertainment, and despite the self-proclaimed 'psychological' basis of the Binet-Simon test, it was doctors who controlled the procedures for administration of mental deficiency. As Patricia Potts has pointed out "From 1890, when Dr W R Smith was appointed as medical officer to the London School Board, until 1975, when the DES circular 2/75 transferred the final say to the educational psychologists, doctors certified children as unfit to remain in ordinary school."[46] But nonetheless, it was within this administrative framework that a psychology of the individual first developed and was socially deployed, and that psychologists began to establish themselves as an autonomous professional instance. The

conditions of possibility for the emergence of individual psychology had now been established.

Psychologists against doctors

> Even as late as 1920 the psychiatric examinations carried out by the school medical officer were generally limited to measuring the size of the skull and inspecting the child for 'stigmata of degeneracy', 'cranial abnormalities', 'nerve signs', 'symptoms of malnutrition or other chronic deficiencies'... Treatment was mainly physical; and, when that failed, the only remedy was held to be segregation. Mental symptoms, mental causes, and psychological or social methods of treatment were dismissed as the speculative fancies of the layman. ...by 1912 there were strong appeals from teachers and educationalists, urging that, except in the grosser cases, the selection of the defective children should no longer be left entirely to the medical officers.
>
> Gertrude Keir, 1952[47]

The doctors certainly came out on top in the first struggles over the pathologies thrown up by the school. This was not simply a question of their intransigence, their influence in high places or their superior status.[48] The school was not an accidental gain for medicine; from the start of compulsory and universal schooling doctors conceived of the school as a site which was as much medical as pedagogic. With the introduction of a universal system of education, a transformation could occur in the preventative and hygienist medical strategy which had been operative during the nineteenth century. The heyday of the social hygiene movement was probably in the mid-nineteenth century; by the end of the century the

medical language of contagious atmospheres of vice and disease, and the concommitant programmes of sanitisation of social space, had ceased to provide the terms for political arguments over 'the social question'. The new preventative medicine which could organise around the school was a medicine of the clinic rather than the epidemic, a medicine of cases rather than spaces.

The first Annual Report of the Chief Medical Officer of the Board of Education put it thus:[49]

> Preventative medicine... has become an appropriate medium for the solution of the problems of hygiene in relation to the education of the child... the centre of gravity of our public health system is passing, in some degree, from the environment to the individual and from problems of outward sanitation to problems of personal hygiene.

What the school allowed was a generalisation of the clinical experience to a whole class of individuals. A new site had emerged, alongside the hospital, a site which allowed the same sort of individualisation, comparison, statisticalisation and so forth, but now not in respect of those few who had, for some reason or other, come to medicine for treatment, but to all those who, simply by virtue of being a certain age, became subject to medical investigation. Thus, in neo-hygienism, an individualised clinical medicine could serve a generalised, social-hygienic function.

From the start, the School Medical Service, under the eye of George Newman who was the Chief Medical Officer at the Board of Education from 1907 to 1935, operated within this neo-hygienist strategy. The earliest interest of medicine in education had, however, been of a rather different order. It concerned the potentially deleterious effects of education in schools upon the

health of the child. Reading in poor light or with bad print could damage eyesight, sitting at cramped desks for long hours at crucial periods of growth could produce physical deformities, damage could be done by the 'mental over-pressure' which existed in the elementary schools of London.[50] When Dr W R Smith was appointed as Medical Officer to the London School Board in 1890, it was along these lines that his duties lay. He was to advise on those aspects of the school which might affect the health of the child - ventilation, lighting, sanitation and so forth.[51]

But three years later, when James Kerr was appointed in Bradford, the neo-hygienist strategy had already begun to form.[52] It began to be recognised that the school could act as a mechanism to provide data on the health of all children in the population, and that this data could be of great value when processed, tabulated, and analysed in various ways. And, at the same time, the school was a site where individual diagnostic techniques could be applied to all children, and around which an integrated system of treatment could be organised. Doctors began to campaign for the social recognition of this medical function of the school. In 1896, the Society for the Promotion of Hygiene in School Life was formed - Warner, Shuttleworth and Langdon Down were key members. And already, the nascent individual psychologists recognised the danger that this medical strategy was to pose to them: Sully, when requested to co-operate, declined and strove to maintain the separate existence of the Child Study Society.[53] But the movement of doctors was growing and international, and achieved further publicity in two International Conferences on School Hygiene, the first at Nuremberg in 1904, the second in London some four years later.

Neo-hygienism was the dominant strategy within the debate over

national deterioration, as it took shape in the first decade of the twentieth century. It posed its explanations principally in terms of the deleterious effects upon health and physique of poor environment, bad food, poor personal hygiene and wasteful and ignorant habits of household management. The eugenicist argument in terms of an hereditarily transmissible defect manifested in pathologies of intellect and calling for a campaign of segregation or sterilisation, though active, was limited and subordinate within this debate. What was called for, in the main, was a programme of reform of habits of cleanliness, feeding, personal and household regimens; this would, if successful, improve health and reverse the deterioration of the national health and physique. Neo-hygienism found its ideal locus in the school. Within it the question of mental defect and feeble-mindedness occupied a relatively minor position - it was simply one element in a complex of symptoms recognisable by a trained medical gaze. Problems of intellect always needed to be understood within the context of the general physical condition, health and cleanliness of the child and did not occupy any autonomous or exemplary place in relation to them.

From the Committee of Defective and Epileptic Children to the Inter-Departmental Committee on Physical Deterioration, the success of neo-hygienism accounted for the proposals which were put forward and the authoritative role which was accorded to doctors. The Inter-Departmental Committee's recommendations on schoolchildren were all in this vein: schools should be established for children whose ill-health made them temporarily unsuited to normal schools; every school authority should have the duty to make medical inspections of schoolchildren; authorities should be compelled to provide school meals for underfed children.[54] While the Government balked at introducing the radical interventionist legislation which such

recommendations enjoined, the Committee on Medical Inspection and Feeding of Children which reported in 1905 did nothing to provide any alternative, and indeed made the case more radical by implying that even medical inspection left untouched the question of the treatment of the conditions it revealed.[55] The Education (Provision of Meals) Act 1906 contained a clause which compelled local authorities to provide for the medical inspection of children. Thus the School Medical Service came into existence, with Newman as head of a new Medical Branch of the Board of Education.

Within this neo-hygienist strategy, the long-standing political concern with the population had been inflected once again. It was now not a simple matter of numbers, of rates of birth and death, of major diseases, of differential rates of reproduction in the different classes. It was a matter of fine, and almost indelicate, detail. Height, weight, eyesight, hearing, vermin and lice, ringworm, washing habits and cleanliness of clothing - all were painstakingly investigated, recorded and analysed. The school was the surface upon which all the petty details of the lives of individuals could emerge as a domain of problems and objects for social reformation.[56]

The tactics of reform were two-pronged. Firstly, there were those directed at the child itself. The provision of school meals to the underfed was clearly aimed at direct and immediate improvement in health, and at long-term improvement in physique and fitness. But doctors were more involved in direct clinical intervention - diagnosis of a range of conditions from notifiable diseases, through sensory deficiencies of one type of another, to lice or general lack of cleanliness, each to be accompanied by recommendations for treatment. Newman was at the forefront of those who wished the

clinical method of diagnosis in the school to be linked to an indigenous clinical machinery for treatment. This would avoid the vagaries of parental action or lethargy, or the problems of family doctor or hospital, intervening between these two indissociable aspects of clinical medicine. Whilst these clinics were slow to get established, the movement soon gathered momentum. The first school clinic was opened in Bradford in 1908, and by 1935, when Newman retired, over 2,000 had been established throughout England and Wales.[57]

But if this all sounds very much like individualised medicine, differing only in its universal application to all subjects within a given age range, the aspirations of the neo-hygienist strategy went far beyond this. For the second tactical prong was one which sought to utilise the clinical scrutiny of the child in a campaign for upgrading the hygiene and morals of the home and the space of personal existence outside the doctor-child encounter. Newman was quite clear on this, in his rebuttal of those who might think that to set up such a medical system was to relieve parents of important duties and hence to encourage irresponsibility:[58]

> One of the objects of the new legislation is to stimulate a sense of duty in matters affecting health in the homes of the people, to enlist the best services and interests of the parents and to educate a sense of responsibility for the personal hygiene of their children... It is in the home, in fact, that both the seed and the fruit of public health are found.

This is what gave this neo-hygienist strategy a potency and flexibility far beyond anything which psycho-eugenics could provide, with its impoverished tactic of ascertainment of intellectual pathology and segregation of those falling a certain way below the norm. For neo-hygienism, the school was the fulcrum of a mechanism

which could be both universal and individualised, which enlisted the child and family themselves in the reformation of all the previously petty and personal matters of quotidian existence - neck scrubbing, teeth cleaning, head washing and so forth. The mechanism allowed for the generalised insertion into the home, not only of moral principles and maxims concerning the virtues of cleanliness and so forth, but of the detailed behavioural techniques and modes of personal and household management in which they consisted.[59] It allowed for the monitoring of those transformations which did occur in the home through the continued scrutiny of the child who became, as it were, the symptom of the state of play in the personal domain. The school thus occupied a crucial position within a more general strategy of public health. It is therefore not surprising that the work of the School Medical Officer was to be closely associated with that of the Medical Officer of Health, so much so that in two thirds of authorities the same individual fulfilled both roles.[60]

This configuration thus allowed school hygiene, and the pathologies thrown up by the school, to be linked with, on the one hand, home hygiene, management and morals and, on the other hand, with the health conditions of the community - notifiable and non-notifiable diseases, external sanitation and so forth. By the end of the first decade of the twentieth century this was no longer merely an ideal programme; it was a formidable apparatus, legally enforced, with School Medical Officers in every authority, with every schoolchild compulsorily inspected, with the whole enterprise supported by public funds, exploiting the existing conceptual and technical resources of clinical medicine, and linked in to the statutorily established system of public health.

It was not merely professional jealousy, then, which accounts

for the opposition of doctors to the involvement of teachers or others in this apparatus, nor was it merely professional status which accounts for the success of this desire for exclusivity. It was a function of the way in which the strategy was set up, and the way in which it was to operate. From the Defective and Epileptic Children Committee in the 1890's to the debates over who should supervise Special Schools in the 1930's, doctors and teachers were at loggerheads, and doctors always won. Shuttleworth, Beach, Harris and others, in their evidence to the Committee, all stressed that only a doctor was capable of diagnosing defects, because this involved understanding the particular difficulties which a child was showing in the school within a spectrum of illnesses and physical defects which may have been causing them. This required an adjudication between one diagnosis and another, an adjudication which could only be made on the basis of a clinical training from which teachers had not benefited.[61] Evidence to the Royal Commission on the Care and Control of the Feeble-Minded revealed a similar position; as Sutherland and Sharp point out, in every case the doctors considered themselves to be the only diagnostically competent agents, and in every case of ascertainment discussed it was the doctors who had indeed made the final decision.[62]

Legislation too enshrined the dominant role of medicine. From the Elementary Education (Defective and Epileptic Children) Act 1899, through the 1907 provisions for inspection of schoolchildren, to the Mental Deficiency Act 1913 and the Elementary Education (Defective and Epileptic Children) Act 1914 to the Education Acts of 1921 and 1944, it was always a medical officer of the local authority who was vested with the duty and power of ascertainment. And Newman, again, was clear on this point - while, of course, an important part was played by teachers in making the 1907 legislation work, he deprecated

any attempt to "overburden" them as a result - particularly with any part of the work bordering upon the responsibilities of the school doctor.[63]

It was in this conflict between doctors and teachers, and in the clear subservience of the latter to the former which was established, that the possibility lay for the formation of an oppositional alliance. Psychologists and teachers combined around the question of ascertainment in respect to the educational problems involved in feeble-mindedness in an attempt to isolate a non-medical space of diagnosis, decision and school allocation. For, as will have already become clear, the English psychologists of the individual had failed in their claims to occupy this space and to adjudicate on the pathologies of the intellect which the school revealed. From 1905 onwards, the psychologists, from within their psycho-eugenic strategy, were vociferous in their criticisms of the use of the Binet test for the measurement of intelligence and the diagnosis of feeble-mindedness. The test, they claimed, was not based on any rigorous definition or theory of intelligence; it failed to link its measures to identifiable sensory or other variations in function; the measures it gave were unreliable and pragmatic; it was dangerous for those unversed in psychological knowledge and procedures to use this test as a mechanical device for identifying defect.[64] But however well founded the criticisms, it was, as we have seen, the Binet-Simon test which was deployed with regularity from about 1910 onwards in the ascertainment of feeble-mindedness by school doctors.

Psychologists' historical accounts of this period make interesting reading. They tend to represent it as a struggle between psychological enlightenment and the outmoded and barbarous methods

and beliefs of the doctors. Doctors, it is claimed, relied almost entirely upon stigmata and physical signs in the ascertainment of feeble-mindedness, and even utilised such absurd diagnostic procedures as the measurement of skulls. This is because they were under the sway of an organicist illusion - that all mental disorders were brain disorders - and they therefore explained educational backwardness in terms of cerebral inadequacy or specific brain lesions, of latent epilepsy or chorea, of inadequacies in the quality, quantity or distribution of the blood. They were, it would appear, implacable opponents of "the new-fangled scheme of intelligence tests".[65]

In fact the evidence suggests something rather different. The schedules utilised for the inspection of children referred to School Medical Officers on suspicion of mental defect certainly do refer to stigmata, but these occupy a relatively minor part of the examination. At least one third of the schedule which Newman included in his Report of 1909 concerns general history and family background, and one third is specifically devoted to 'psychological' questions: reactions of motor mechanisms, reactions to sensory stimulation, emotional conditions, 'tests of intelligence' and will-power.[66] And very soon the Binet-Simon tests were included within this schedule.[67] So it was not the lack of attention to familial or psychological intellectual matters which differentiated the neo-hygienist modes of ascertainment from those advocated by the psycho-eugenicists. The distinction was rather in the privilege which was accorded to the question of intellectual defect and the modes of conceptualising it in relation to pathology more generally.

For the psycho-eugenicists, the fundamental purpose of testing was to identify those who were intellectually defective and so should be subject to some measure of segregation, permanent if possible and

certainly involving curtailment of reproduction; those not within this defective group were to be allowed to proceed unfettered. But for neo-hygienism, intellectual defect did not have this privilege as both the key index of defective stock and the sign of a potential threat of degeneration. Not, of course, that once a diagnosis of feeble-mindedness had been made, doctors were hesitant about advocating permanent institutionalisation and limitation of reproduction - though they disputed amongst themselves about the relative virtues of segregation and sterilisation.[68] But they refused to regard the diagnosis of feeble-mindedness as the central rationale for inspection, or the test of intelligence as the key diagnostic instrument. Mental defect was only one condition of concern amongst many, and institutionalisation was only one option within a range of possible tactics and a rather unproductive one at that, in that it failed to reach the home environment which was a major target of reform. To the extent that the Binet-Simon test took its place among the various investigations which doctors used, it was just one amongst many; the assessed mental level in and of itself never dictated a decision. This needed to be integrated with other symptoms of ill health and processed through the expertise of a clinician before any course of action could be chosen.

Hence the doctors' opposition to the introduction of psychologists into this apparatus of ascertainment was posed in the same terms as their opposition to ascertainment by teachers. Psychologists were not trained in clinical methods and were not able to situate the intellectual defects which they might observe within the complex of other signs and symptoms of illness which might be present. Sutherland and Sharp quote the following comment from a Medical Officer in 1912, which is worth citing at length, so clearly

does it encapsulate this argument:[69]

> It is proposed that... the diagnosis required by the Act is really, if not nominally, to be entrusted to an officer who is without medical qualifications. A psychologist who is not an expert in medical diagnosis would be sure to over-look diseased conditions which a qualified medical man would discover and hence, in my opinion, the proposed course introduces a grave element of danger... Any new psychological methods which have been proposed in the last decade have received full notice and experimental tests in connection with special school work, so far as they are applicable, and the specialised defects owe their description to the medical officers working among the mental defectives in schools and colonies in this and other countries. The psychologist is thus already employed, but a new principle is introduced by the proposal to employ for diagnosis of mental defect one who has not a training in medical methods and in nervous and mental disorders.

This comment was made during the discussions which did indeed lead to the appointment of a psychologist, Cyril Burt, to the London County Council, to be involved in the diagnosis of children with mental defect. But it would be misleading to see Burt's appointment as evidence of the success of the psycho-eugenic arguments over the neo-hygienists' prioritisation of the clinical gaze of medicine. The appointment of a psychologist was, rather, a tactical compromise between a number of competing positions. There certainly were psychologically trained educationalists - mainly school inspectors trained on Sully's textbooks and often veterans of the Psychological Laboratory of University College - who sought to break the hold of medicine over the diagnosis of intellectual pathology. But there

were also teachers and administrators concerned with the consequences of medical diagnosis. School Medical Officers were thought to be too liberal in their ascertainments, considering that every backward child would benefit from the small classes and individual teaching methods of the special schools. Teachers objected to what they saw as an over-extension of medicine into properly pedagogic matters. Finance committees objected to the expense involved. Parents objected to the stigma which allocation to a special school attached to their children. And Burt's role was to mediate between these pressures, and to act as a check upon excessive ascertainment. It was certainly not a sign of the acceptance of the arguments which he and others had been producing; it was rather that the field of oppositions between doctors, teachers and administrators had opened a space into which individual psychology could be inserted.[70]

The limits of psycho eugenics

Although Burt's part-time appointment did lead to the opening of what he termed a 'Psychological Clinic', which would examine and report on individual children referred by teachers and doctors, there was no question of any general displacement of medicine as the authorised diagnostic instance in cases of intellectual pathology. The aspirations of the psychology of the individual to an autonomous clinical role for psychology were not to be realised within this configuration around mental defect and its ascertainment. In the question of ascertainment, the role which psychologists were to play was precisely that stated by the Medical Officer quoted earlier; not to become the professional agency of diagnosis, but to provide the technical means of investigation of intelligence. And this was not to involve a displacement of the Binet-Simon test, but a lengtny work of inflection and reformulation of the test to bring it into line with the theoretical demands of psycho-eugenics.

In 1914, Burt devoted a two-part article to a criticism of the Binet test, probably written at just the same time as his appointment to the London County Council. Whilst he redeployed the familiar criticisms, he nonetheless could not fail to recognise the conflict between the force of these objections to the test and the practical role which the test had already obtained. He began by posing the question as if it were an open one, although at the same time covertly stressing psychology's claim over medicine:[71]

> In the practical sphere, psychological tests have recently acquired an especial value as our only reliable means of diagnosing mental deficiency... The task of ascertaining what children suffer from such inborn mental defects has, by an Act of Parliament now about to come into force, been made compulsory. Upon these grounds we are faced with an urgent

question. What scheme of tests, suited for either theoretical or practical purposes, is now available?

But, of course, he was forced to recognise that the practical situation, after the recommendation of the Chief Medical Officer in 1913, was that the Binet test threatened to eclipse all other methods, in particular the psycho-eugenic devices which were based on correlational, rather than age-scale principles. Burt was trenchant in his enumeration of the limitations of the Binet test: its lack of theoretical clarity; the heterogeneity of the tests; the fact that test construction should come after the analysis of intelligence into its general and specific capacities; the dependence of the test upon acquired rather than innate characteristics, especially language; the need for correlational studies to eliminate the influence of the environment; the problem that to claim a relationship of intelligence to age implies a uniform and unilinear growth of intelligence and that the attempt to unify differences in intelligence along a single dimension cannot account for the heterogeneity of mental defect. On the basis of this catalogue of criticisms, which may come as a surprise to those today who unknowingly recycle the same complaints against the work of Burt himself, he concluded:[72]

> Except for practical and popular purposes, then, Binet's intention of measuring native intelligence in terms of mental years seems impracticable. It is like measuring stature with an elastic rod, warped in two or three places along its length, and telescoped in upon itself at the upper end.

However, Burt was astute enough to recognise that, by now, replacement of the test was not possible. He adopted a more subtle and insidious plan of revision and standardisation, using the

classical correlational techniques of psycho-eugenics, in order to shift the Binet test into line with the biological, psychological and statistical requirements of the eugenic strategy. Burt's work at the London County Council was largely an attempt to realise this plan. And, by 1920, the task had by and large been accomplished: the synonymity of intelligence with what the test measured, but now backed by a theory of intelligence as a normally distributed, innate, heritable, general cognitive capacity. The influential Report of the Consultative Committee on Psychological Tests of Educable Capacity and their Possible Use in the Public System of Education exemplifies this new synthesis.

The Committee, which was chaired by Haddow, had Ballard, Myers and Spearman amongst its members; its Report was mainly written by Burt. The Report was clear about the advantage of mental tests:[73]

> they provided a method of comparing children in respect of their inborn capacity and thus of selecting the best candidates for higher instruction, and sifting out defectives and dull children for treatment by special educational methods.

And, in addition, tests minimised environmental conditions, were a basis for the prediction of educational capacities, provided an objective standard of judgment, took account of age, and required less time for administration than other forms of examination. Not only did the test possess all the advantages which Burt had claimed it lacked ten years earlier, but they now reached to that very core which was the target of psycho-eugenics:[74]

> What tests of intelligence measure, therefore, is inborn, all round, intellectual ability.

It is not surprising that Burt was now able to accord the test the very ability and function which he had denied and criticised for so long. At the beginning of his now classic Mental and Scholastic

Tests, in which his revised and standardised Binet-Simon tests were first published, he wrote:[75]

> No appeal is more often addressed to the psychologist than the demand for a mental footrule. Teachers, inspectors, school medical officers, care committee visitors, the officers of the juvenile criminal courts, all have long felt the need for some such instrument...

And in the revamped, standardised intelligence test, individual psychology had established the congruity between social norms and statistical norms which was fundamental to it theoretical existence, its classificatory tactics, and its strategic aspirations.

The 1920's saw a flood of literature on tests and testing, new standardisations, surveys and experiments, guides for the use of the tests in diagnosis.[76] Though the tests were modified, re-standardised, new content introduced and old items dropped, the technique of the test, and the conception of what it was that it measured, was to remain virtually unchallenged for some forty years. Phillip Ballard was, perhaps, being only slightly over-rhetorical when he wrote in 1920:[77]

> Binet's crowning glory is, not that he got together a medley of heterogeneous tests for the detection of the feeble-minded, but that he invented a scale. In this he resembles Saul, the Son of Kish, who set out to look for asses and found a kingdom.

The tests were, indeed, the gateway to the psychological kingdom, but they themselves were not sufficient to found individual psychology's claim to provide an alternative theory, method and practice to medicine. They did not succeed in staking out a field in which individual psychology could become a clinical and diagnostic instance in its own right, with its own vocabulary of pathologies,

forms of explanation and modes of treatment. The psychology of ability constrained itself too much, its role was never more than the provision of the techniques and instruments which would form a part, but only a part, of the assessment of degrees of mental defect.

Of course, testing had functions beyond the field of mental defect, for the field of application of the instrument in the eyes of the English psycho-eugenicists was always across the whole span of human ability. The two other principal fields of application of testing were in vocational guidance and in selection for secondary education. In respect of the former, undertaken by C S Myers at the National Institute of Industrial Psychology, Burt again was active, as part-time head of the Vocational Section.[78] The main work on group tests of intelligence was carried out by Godfrey Thomson.[79] Gillian Sutherland estimates that seventy out of one hundred and forty-six local authorities used group tests of intelligence for the purposes of selection at some point between 1919 and 1940, most commonly the Moray House tests which Thomson devised.[80] Interestingly, Sutherland notes that the alliance which psychologists and teachers had forged over the question of ascertainment of intellectual defect for individual children did not apply in respect of these group tests. Teachers frequently opposed the introduction of these devices, a resistance to psychological techniques at a local level which Sutherland attributes to a number of factors. There was, she argues, a heritage in which 'measurement' was associated with the detested system of 'payment-by-results'. The National Union of Teachers had waged a lengthy struggle to emancipate pedagogy from these externally imposed forms of judgment, and the introduction of group testing raised again the suspicion that the results of such mass examinations

would be used not simply to evaluate pupils, but also to assess the quality of the schooling they were being given. In addition, teachers themselves claimed the right and the expertise to assess the performance of pupils, and the importation of techniques from another discipline threatened this aspect of their still precarious social and intellectual authority, as well as removing much valued discretionary powers. Sutherland argues that, as a result of factors like these, many local authorities and teachers, though they might have experimented with the tests, relied instead upon the traditional methods of interview and examination.[81]

Much has been written on the future of tests of intelligence in selection and streaming after the installation of the tripartite system of education in the Education Act of 1944.[82] But however successful individual psychology was in providing the technology of measurement and allocation, this was not equivalent to the establishment of an autonomous field of judgment and operation in respect of mental pathologies. In the late 1920s and the 1930s, psychology was to try again around a different set of problems. These did not prioritise the intellectual variabilities and deficits of individuals, and thus the task of distributing individuals to appropriate institutions on the grounds of intellectual level. They concerned the registering and adjustment of problems of character and temperament, of will and emotions. There were a number of elements involved here.

Firstly, by the 1920s, the centrality accorded to the problem of mental deficiency in social and political argument was on the wane. Not that legislative activity ceased. The Wood Committee was set up jointly by the Board of Education and the Board of Control in 1924, particularly to examine the confusion which had been created in the earlier Acts over the division of powers between different

authorities in provision for defectives, especially for children. Before it reported, the Mental Deficiency Act 1927 had tinkered slightly with the Act of 1913, to allow for cases where illness or injury produced mental defect during childhood or adolescence rather than at birth. It also stressed the duty of local authorities to ascertain and supervise defectives, but reduced the emphasis upon segregation in favour of supervision outside institutions.[83]

When the Wood Committee finally reported, in 1929, it attempted to reconcile two apparent conflicts.[84] There was the conflict between the position which demanded segregation of defectives and that which accepted the possibility of non-institutional supervision as an alternative. And there was the problem that the growing emphasis on environmental and social factors in the production of mental deficiency conflicted with the commitment of the expert members of the Committee, who included Tredgold, Burt and Pinsent, to the notion of inherited and irremediable defect calling for compulsory curtailment of reproduction. Following Tredgold's classification, the Wood Committee distinguished between primary and secondary amentia. The latter was non-heritable, individually caused, through illness or injury, and ameliorable through some form of intervention. The former, however, was the real problem. Primary amentia was the last stage of inheritance of the degeneracy of the subnormal group. Far from being a tiny minority, this subnormal group constituted the lowest tenth of the population - the insane, the paupers, the criminals, the alcoholics, the prostitutes and the unemployables. Here the Committee rehearsed the familiar eugenic argument - the group must be prevented from propagating its own kind and dragging down the rest of the community; segregation or sterilisation were the only methods possible. This was not a case,

by and large, for legislation, but for a more systematic, vigorous and effective administration of the present legislation. It was vital that the work of ascertainment of mental defect, so often carried out in a hurried and partial way by school doctors looking only for the physical signs of deficiency, should be made more rigorous, and that the criteria used in ascertainment should not be physical or educational but be those of social inefficiency. Only then would the 'social problem group' be identified for compulsory and certain treatment.[85]

Little appears to have resulted from this restatement of the psycho-eugenic programme in such stark terms, except for the establishment of yet another Committee. The Wood Committee equivocated, largely on practical grounds, on the question of legalising sterilisation for defectives; the Brock Committee, set up by the Board of Control to consider this quesion, reported in 1934. Its eugenic premise was made explicit in its terms of reference:[86]

> To examine and report on the information available regarding the hereditary transmission and other causes of mental disorder and deficiency; to consider the value of sterilisation as a preventative measure having regard to its physical, psychological and social effects and the experience of legislation in other countries...

Whilst hedging their bets on the question of causation in any individual case, the Committee was clear that mental disorder and defect was transmissible in the majority of cases, and that, when it was hereditary, it was linked to the familiar forms of degeneracy from insanity to epilepsy. They also concluded that mental defect was more frequent in the lower stratum of society, where innerited conditions played a large part in the conditions of the social problem group: that "relatively small section of the community the

families of which show a high incidence of chronic pauperism, physical disease, infantile mortality, neglect of children, habitual crime, mental disease and mental defect."[87]

The Brock Committee recommended that sterilisation should be legalised, though on a voluntary basis and subject to legal safeguards. And they concluded with what was perhaps the last official plea for a eugenic strategy, and therefore worth quoting at length:[88]

> we were impressed by the dead weight of social inefficiency and individual misery which is entailed by the existence in our midst of over a quarter of a million mental defectives and of a far larger number of persons who without being certifiably defective are mentally subnormal. This mass of defectives and subnormals is being steadily recruited and is probably growing. Certainly nothing is being done to diminish it beyond the segregation of a portion of those more obviously unfitted for community life. In the second place, we were increasingly impressed by the injustice of refusing to those who have good grounds for believing that they may transmit mental defect or disorder and who are in every way unfitted for parenthood the only effective means of escaping from a burden which they have every reason to dread... Without some measure of sterilisation these unhappy people will be doomed from birth to misery and defect. We can see neither logic nor justice in denying these people what is in effect a therapeutic measure.

But their recommendations were never turned into legislation, and their plea already sounded outmoded. Certainly the events in Nazi Germany sounded the death knell for the claim of such a eugenic strategy to respectability. But it is worth asking why it was that

the psycho-eugenic programme had such a limited impact over the whole of its active life in the first thirty years of the twentieth century, despite the influence of its promoters, the vigour of its publicity, the apparently propitious time of its launching and its substantial theoretical back-up. No doubt one could put this down to natural revulsion, and the temptation of hindsight is to feel that such a scheme was never compatible with our native notions of justice and humanity. Yet such an anachronistic judgment fails to account for the fact that the proponents of the eugenic schema saw themselves as humane and enlightened, and the opposition to them was seldom posed in these moralistic terms. Certainly the opposition from the medical neo-hygienists who were installed in key positions by legislation was crucial. But what was it about this neo-hygienist strategy which allowed it to function and extend itself whilst the eugenic strategy ran into a cul-de-sac? An explanation in terms of the superior status of the medical profession seems to assume what it sets out to demonstrate, and ignores the fact that whilst neo-hygienism was certainly a medical strategy, many doctors supported psycho-eugenics from positions of power and influence - Tredgold was a key example. And the eugenicists played such a central role in the official enquiries we have just discussed, yet still to no avail.

One answer can be constructed in terms of bourgeois liberties and individual rights - the argument that the economic and political systems of bourgeois democracies depend upon the existence of individuals equipped with personal rights. The degree of curtailment of such rights necessary for the effective implementation of a full scale programme of negative eugenics, involving everything from compulsory segregation and sterilisation at one extreme to the licensing of marriage and procreation at the other would be

incompatible with such a fundamental doctrine. But even so, fairly radical measures of compulsion and intervention were proposed and implemented at the turn of the century, and such an argument would find it hard to explain why even the limited eugenic proposals in respect to mental deficiency obtained so tenuous a hold on reality.

The argument proposed in the present study is rather different. What eugenics entails is a direct coercive intervention into the sphere of personal existence, an intervention which operates by, first of all, ascertaining who is pathological, and how many such individuals there are, and secondly by removing and isolating these dangerous elements to prevent their number increasing still further. This strategy works by an attempt to subtract, as it were, the pathological from the normal: it is negative and deductive. It leaves the 'normal' untouched, and where it does intervene into families to remove individuals its objective is to prevent such families from functioning, or rather malfunctioning, spawning more defective progeny and acting as a focus of illness, vice and defect. The identification of pathology is thus the occasion for disabling the family. But we have already seen that the neo-hygienist strategy is both wider in scope and more flexible in application than this. It certainly has disablement and segregation as one of the weapons in its armoury. But it does not limit itself to the neutralisation of this pathological minority; it aims rather to utilise its clinical expertise in a preventative way, through moralising, training, reforming those who fall within the range of the normal. To inject new norms of health and household management into the home through the instrument of the child. To make the family take onto itself the responsibility for its own hygiene - not merely to urge this as a moral or religious duty, or for the sake of propriety, but to produce it at the level of the detailed techniques of washing, body

maintenance, habits of eating and defecating and so forth. And it is also a strategy more compatible with the doctrine of personal autonomy and individual liberty, for what are urged as duties and responsibilities will also have to be accepted by family members as their own desires.

It is along these lines of development that social policy proceeded during the 1920s. A strategy of this type was adopted and generalised. It entailed not ascertainment and segregation of the socially inefficient but the promotion of family welfare, the production of beneficial behaviours, habits and wishes within the 'private' space of the family, aided by a growing number of professionals with expertise in these areas which could be called upon. It was here that a new space opened for the operation of psychological agents, techniques and theories in the period after the First World War. This space formed in the network of relations between the school, the family and the juvenile court. The new objects which were produced here were not the mental defectives but children with disorders of temperament, emotion and behaviour, maladjusted or delinquent children. Around them was created a new institutional form - the Child Guidance Clinic - and a new psycho-social strategy.

NOTES TO CHAPTER SEVEN

1 Titchener, 1901-5, Vol 2, Part 1, pv.

2 Fechner, [1860] 1966.

3 Ibid, p7.

4 Wundt, [1896] 1897.

5 Galton, 1883, pp 28-29.

6 Keir, 1952, p9.

7 Ibid, p10.

8 Galton, 1891.

9 cf Keir, 1952, pp 10-11.

10 Cattell, 1890, p373.

11 Loc cit.

12 Ibid, pp 380-380.

13 Spearman, 1904. For the analysis of the problems of the tests, see Sharp, 1899 and Wissler, 1901.

14 Ibid, p269.

15 McDougall, 1914, p302.

16 For details see Hearnshaw's 1979 biography of Burt, p27.

17 Spearman, 1915, p313.

18 Burt, 1909, p169.

19 Ibid, p97.

20 The 'scandal' is summarised and discussed in Hearnshaw, 1979, Ch 12.

21 Ibid, p57.

22 Burt, 1909, p176.

23 Board of Education, 1910.

24 Board of Education, 1911, p220.

25 Board of Education, 1912, p196.

26 Loc cit.

27 Board of Education, 1913, p229.

28 Ibid, p231.

29 Binet and Henri, 1896.

30 Binet's early work on intelligence is discussed in Wolf's (1973) biography, especially Chs 3 and 4. A useful source of material in translationis Binet and Simon, 1916.

31 Quoted in Wolf, 1973, p140.

32 Binet and Simon, 1905b.

33 Quoted in Wolf, 1973, p141.

34 For an account of this episode, see ibid, p160ff.

35 Ibid, p170.

36 Ibid, p29.

37 Binet and Simon, 1905a, present this investigation in detail immediately before the article in which they first put forward their scale. Wolf, op cit, p173, refers to it as this 'catalytic agent' which, given the need, the experimental discernment and the hypothesis which Binet already possessed, set off the necessary insight.

38 Quoted in Wolf, op cit, p175.

39 Binet and Simon [1907] 1914.

40 Binet and Simon, 1908.

41 Binet and Simon, 1905b, p246; translation quoted from Wolf, 1973, p188.

42 Wolf, 1973, p188.

43 Binet and Simon, 1908, p60; translation quoted from Wolf, op cit, p191.

44 Binet and Simon, 1909, p146, translation quoted from Wolf, op cit, pp 203-204.

45 Stern [1912] 1914.

46 Potts, 1982, pp 1-2.

47 Keir, 1952, p10.

48 Sutherland and Sharp, 1980, in a useful examination of some of the primary source material, appear to account for the victory of the doctors in terms of prior incumbency plus high status.

49 Board of Education, 1910, p15.

50 On eyesight see Cohn [1883] 1886; Crichton-Brown's report of

1884 to the Education Department on 'mental over-pressure' is discussed in Board of Education, 1910a, pp 2-4; generally see Dukes, Health at School, 1887.

51 Cf Pritchard, 1963, p128. There was also a lengthy debate on the specific effects of education on women and, in particular, upon their fertility.

52 Cf ibid, p128 for a discussion of Bradford and the influence of the Independent Labour Party and Margaret McMillan. Kerr moved to London in 1902 where his relations with Newman were not always harmonious - Cf Sutherland and Sharp, op cit, p183f.

53 Cf Keir, op cit, p10.

54 Local Government Board, 1904. The open-air school movement was clearly within this strategy. The first open-air school was founded in Charlottenburg, outside Berlin, in 1904, and a number of such schools opened in Britain, both for day pupils, and, after 1911, residential. The idea was that dark, overcrowded and ill ventilated urban schools exacerbated the conditions of nervous, debilitated, undernourished and anaemic or tubercular children, who would recover more quickly in fresh air, but also with wholesome and regular meals and rest. Margaret McMillan pioneered open-air sleeping, in addition to day-time activities; cf Pritchard, op cit, pp 171-175 for a summary.

55 Board of Education, 1905, Vol 1, pp 31-32.

56 Of course, these aspects of the organisation of the body had been the concern of many different discourses - religious, moral, texts on manners and so forth - for many centuries. See, for example, the texts discussed by Elias in The Civilising Process, [1939] 1978. And both philanthropic and medical discourse, especially during the nineteenth century, sought to instill norms of personal conduct into families. But the school is a mechanism which allows the interventions to be universalised and articulated within a technical apparatus - this transforms the nature and possibility of the strategy. This point is taken up again presently.

57 Newman sought to promote these clinics in his very first Annual Report and regularly reported on their progress.

58 Board of Education, 1910, p32. These objectives were laid out in a memorandum from the Board in 1907, Circular 576.

59 Cf n56, and the discussion in Chapter 8 below.

60 In his Report for 1909, Board of Education, 1910, p15.

61 Education Department (Defective and Epileptic Children) Committee, 1898, passim.

62 Royal Commission on the Care and Control of the Feeble-Minded, passim; cf Sutherland and Sharp, 1980, p182.

63 Board of Education, 1910.

64 See, for example, Abelson, 1911; Myers, 1911; Brown, 1911.

65 See, for example, Keir, 1952, p14; Burt [1952] 1968, p64n.

66 Board of Education, 1910.

67 See the discussion earlier in this chapter.

68 Eg Kerr, 1928, which is discussed in Potts, 1982.

69 Sutherland and Sharp, 1980, p184.

70 For accounts of this episode see Hearnshaw, 1979, Ch 3; Burt, [1952] 1968, pp 62-64; and Sutherland and Sharp, op cit.

71 Burt, 1914, p36.

72 Ibid, p50.

73 Board of Education, 1924, p66.

74 Ibid, p72.

75 Burt, 1921, p1.

76 For some examples of this copious literature see Ballard, 1920; Ballard, 1922; Brown and Thomson, 1921; Gordon, 1923; Herd, 1930; Peterson, 1925; Richardson, 1922.

77 Ballard, 1920, p13.

78 Myers discussed the uses of psychology in his book of 1918, drawing attention to its role in industry, drawing on the work of Munsterberg and Taylor, (cf Munsterberg, 1912). The NIIP published the Journal of the National Institute of Industrial Psychology from 1922 onwards; cf also Myers, 1920; Myers, 1926; and Welch and Myers, 1932, which reviews ten years work of the NIIP. A brief account of this area is contained in Hearnshaw, 1964, pp 275-282. Unfortunately there is no space to pursue the important issues raised by this field of work.

79 Thomson, 1922; Brown and Thomson, 1921. For Thomson's own account of this, see his article in Boring et al, [1952] 1968; this work is discussed in Sutherland, 1977 and Sutherland, 1981.

80 Sutherland, 1981 and Sutherland and Sharp, 1980, p197, n37.

81 Sutherland, 1981.

82 Most notably the work of Brian Simon - see his 1971, 1974 and 1978.

83 Jones, 1972, pp 215-217 is a useful account.

84 Board of Education and Board of Control, 1929.

85 Ibid, passim.

86 Board of Control, 1934, p3. The Board of Control also produced a Report in 1931 on the use of segregation in colonies for mental defectives; Board of Control, 1931.

87 Board of Control, 1934, p77.

88 Ibid, p55.

CHAPTER EIGHT

HYGIENE AND WELFARE

Medicine in the nineteenth century construed its social concerns in terms of the effects of unhealthy circumstances upon vulnerable human bodies. It conceived and promoted grand schemes of environmental reform in this light - reforms of housing conditions, clean air, purification of water and food, efficient sewage disposal and so forth. This way of conceptualising the genesis and prevention of disease, based upon a medicine of social spaces and miasmatic communication, provided the nineteenth century with the means to understand many other social ills, such as vice and delinquency, in terms of the spread of contagion through an unhealthy moral atmosphere. In the first two decades of the twentieth century this strategy was displaced by another, which focussed not on the environment but on the individual, not on external reforms but on family habits, not on the prevention of disease but on the promotion of health and welfare, through hygiene at the level of personal conduct. Neo-hygienism was the strategy within which a range of new measures concerning infant mortality were developed. It also provided the terms in which many other social problems were conceived, and the rationale for the proliferating activities of 'welfare work' which began to fill out the space between social expectations and personal existence.

It also provided a new way of thinking about problems of mental pathology. This sought to break down the stigma surrounding 'lunacy' and 'madness' in order to facilitate early and preventive treatment of such conditions, and hence reduce the amount of crime, immorality and social inefficiency which they gave rise to. The movement for

mental hygiene and mental welfare forged a new link between childhood pathology and socially undesirable conduct, one that did not prioritise ascertainment and segregation but care through early treatment and prophylaxis through the promotion of good mental health practices in the home. It now appeared that minor mental disturbances of childhood, if left untreated, could lead to major social troubles; that these disturbances could be produced or prevented by certain sorts of relations within the family; and that they could be cured by early treatment. This conception linked to another, developing around the juvenile court, which regarded youthful delinquency as an expression of mental pathology rather than of evil intent. Here, too, a continuity was proposed between criminal and non-criminal disorders of childhood. This second line of argument also prioritised early intervention into families and reformatory treatment of children in order to prevent future criminality and promote social efficiency.

In these events, a new field of problems emerged, with the maladjusted schoolchild and the delinquent juvenile as its central figures. Around these children, a new institutional site was developed - the child guidance clinic - which individual psychology would try to make its own. But its success was partial; it was not the psychology of the normal distribution curve and the standardised test which provided the expertise in this domain, but a 'new psychology'. This proposed a different way of conceptualising the genesis of disorders of conduct, different techniques of diagnosis and reform, and a different conception of the nature of the family and the means and objectives of intervention. It was this 'new psychology', rather than the psychology of the individual, which would eventually allow the emergence of a non-medical instance of

diagnosis and therapy. These events, which are the subject of the final three chapters of this study, thus laid the foundations for the 'psycho-social' strategy which reached its heyday after the Second World War.

The hygienic mother and child

> The centre of gravity of preventive medicine has in recent years shown a tendency to move, in some degree, from the environment to the person - not that the environment is unimportant, but that in highly civilised States the individual has now become relatively more important... Recent advances ... have shown the growing inportance of the individual - of his heredity, upbringing, habits, and physical training, his rest and work, his hours of labour, and his innate and acquired powers of resistance to disease. In order to secure a healthy nation we must first obtain healthy individuals. This is the reason why - almost imperceptibly - we are moving from external conditions to personal characteristics, from the study of the environment to the study of the mother, the child, and the adult; or, in other words, to the problems of maternity, of child welfare, and of insurance against ill health of the individual. .
>
> George Newman, 1914[1]

Neo-hygienism transformed the field of public health through the individualisation of preventive medicine. Public healtn was no longer a matter of the relationship between passive and receptive bodies and an environment which might or might not be pathogenic - entailing action at the level of clean air, pure water, sufficient and suitable food, satisfactory housing and improved domestic sanitation, though these remained important. It was now also a matter of health as a positive value, as something to be achieved at

the level of family regime and individual habits. Health was to be regulated at the level of personal conduct. Hence, as Newman put it in 1919 "the relationship between morality and preventive medicine is intimate and profound."[2]

The principle terms of this strategy were hygiene and welfare. The hygienic management of one's bodily functions, of one's habits, of one's personal environment, of one's encounters with others. The welfare of those whose health depended upon the hygienic conduct of others. A whole range of social problems appeared in terms of hygiene and welfare, the lack of them, the need to promote them. Of particular significance were the decline in the birth-rate in the early decades of the twentieth century, the loss of life in the First World War, and the further decline in births in the twenties and thirties. Around these issues the old concern with infant mortality and the conservation and promotion of the health of the population in general, and children in particular, was re-awakened, but it was now construed in neo-hygeinist terms.[3] At the level of the school the danger was tackled through changes in school design, recommendations that classes be held in the open-air, and in campaigns for open-air infant and nursery schools where infants could be tended, washed and fed, and exposed to the beneficial effects of fresh air.[4] The strategy was provided with a pedagogic back-up through the argument that physical health was not only of value in itself, but was also a condition of intellectual health. Special open-air schools were started for 'delicate children' where fresh air, healthy exercise and personal hygiene were to strengthen those who were debilitated through the lack of them. This regime was also prescribed for those with incipient pulmonary tuberculosis, and those who were nervous, excitable or otherwise unable to attend ordinary schools with the

required regularity.[5] The attack on venereal disease was similarly conducted through a campaign for social hygiene.[6]

The techniques of the neo-hygienist strategy were pioneered in the attack on tuberculosis, involving the development of dispensary based mechanisms of inspection, diagnosis and observation, information and education, coupled with the designation of specific sites for specialised treatment and the allocation of patients to them.[7] However most pertinent for our current concerns was the central focus of neo-hygienism upon the family. This is because when the psycho-social strategy displaced neo-hygienism it was through a shift in the conception of the family and the objectives of social intervention into family life. For neo-hygienism, the family was an apparatus for the physical care and hygienic management of the child and for its moral and social education - in short, for its <u>welfare</u>. The object was not merely the conservation of children, but the production of physically efficient bodies and socially productive habits. The means was the training of mothers in diet - with the provision of both guidance as to nutrition and dietary supplements if necessary - the inculcation of the habits of cleanliness and the techniques for achieving it, the promotion of maternal efficiency in so far as the requirements of a healthy child were concerned, and the constitution of the mother as the individual responsible for the proper management of the home. Children were to be regularly scrutinised, not simply for the purposes of diagnosis of illness and remedial action, but also to pick up signs of family malfunctioning. Steps could then be set in hand for the remedy of such malfunction; where it proved intractable the child was to be removed and relocated in a substitute family. School medical inspection and school meals, discussed in the last chapter, formed one prong of this family strategy. The infant and child welfare movement formed another. It

is pertinent to consider this movement in order to map out the essential features of neo-hygienism in the period immediately before and after the First World War.

The many conferences, reports and publications concerning infant mortality in the early decades of the twentieth century saw the high numbers of infant deaths as both indicative of the low physical efficiency of the population and as a particular squandering of a resource which the nation required both for its defence and for its industry.[8] Whilst deaths in the first month of life were largely a consequence of the unfitness of the infant itself, and thus both difficult to prevent and eugenic in their consequences, deaths subsequently were the result of infectious disease, poor diet and lack of hygiene. These were themselves the result of failures of motherhood and were to be prevented through the construction of an elaborate apparatus of scrutiny and rectification. Hence the occasion and objective of intervention was the child, but the instrument was the mother.

The strategy initially involved the bringing of all new-born infants into the field of inspection, enabling the mothers to be reached through through their babies. It entailed a number of elements: promotion of the use of trained and salaried midwives; compulsory notification of births; employment of health visitors to visit the homes of all new-born babies whose birth had been notified; setting up infant welfare centres, 'Baby Welcomes' and schools for mothers to which new mothers could be directed for the inspection of children and for the instruction of mothers; provision of milk and food for necessitous mothers and infants; establishing day nurseries where appropriate levels of hygiene could be maintained and the

progress of children could be monitored. Voluntary organisations proliferated - the National Association for Prevention of Infant Mortality and the Promotion of Welfare of Children under School Age, the Association of Infant Consultations and Schools for Mothers, and many more at national and local levels. By 1916 there were over 160 branches of voluntary organisations and 35 local authorities running infant welfare centres, backed by the urgings of the Local Government Board and the Chief Medical Officer of the Board of Education. And in 1918, the Maternity and Child Welfare Act required each local authority to set up a maternal and child welfare committee, and empowered them to provide the other functions for which some central funding was to be made available.[9]

The target of this strategy of scrutiny and instruction was the working class mother. Whilst some reckoned the middle class mother was equally ignorant, but that her superior standard of living ameliorated the malign consequences, no similar countervailing influences existed for the mother of the working class. As Newman put it: "the principle operating influence is the ignorance of the mother and the remedy is the education of the mother".[10] For "it is not external environment which primarily affects the infant mortality and produces that prematurity, pneumonia, atrophy, and much of that diarrhoea which occur in infant life. These things are procured by some evil conditions in the habits and homes of the people which are, after all, the vitals of the nation."[11] Indeed the main cause of infant mortality was diarrhoea, which resulted from contamination in the home, dirty feeding bottles and dummies and other removable evils which were to be counteracted by raising maternal efficiency, persuading mothers of their maternal duties and educating them in the ways of carrying them out. There were three main channels through which influence could be brought by the State to secure the physical

efficiency of children: through the promotion of healthy motherhood by attention to the physical condition of the mother; through the promotion of healthy infancy, by instructing and training the mother in how to bring up her child after it's birth, and providing assistance when she was not able to care for it efficiently; through the promotion of healthy childhood, by means of systematic medical supervision and education in hygiene during school life.[12]

Mothers-to-be could be educated in the schools - the Board of Education first issued its Memorandum on the Teaching of Infant Care and Management in the Public Elementary Schools in 1910. This advocated instruction of schoolgirls in the domestic arts of proper feeding, tem perance, housekeeping, infant care and the dangers of domestic dirt. But more immediately, the Schools for Mothers, Baby Welcomes and Infant Welfare Centres combined individual scrutiny of babies and advice on management - in Infant Consultations - with classes and instructions designed to convey information, instil responsibility and encourage pride in the home and family. Since attendance at such centres was voluntary, and unlikely therefore to reach those most in need of intervention, the centre was also utilised as the base from which a more comprehensive scrutiny could be undertaken. To each centre were attached health visitors, who would visit all homes where births were notified, classify them according to the efficiency of the mother, repeat visits as often as necessary (ranging from once a month or more for the bad homes to not at all for the better class homes).[13] Thus if inefficient mothers could not be persuaded to attend the centres, instruction would nevertheless reach into the heart of the home itself.

McCleary gives some idea of the scale of this exercise. At the end of 1933, 2,938 health visitors were employed by local

authorities, 2,546 by voluntary associations. Together they undertook 505,674 visits to expectant mothers that year, of which 179,682 were first visits; 3,316,903 visits to children under one year of age, of which 570,830 were first visits; and 4,437,300 visits to children between the ages of one and five.[14]

Middle class mothers, exempted from such a strategy, were moralised through child care manuals, the blandishments of experts on motherhood and of the manufacturers of baby products.[15] Feminist organisations espoused the new doctrines of motherhood, emphasising the need to protect the 'mothers of the race', and therefore also to eliminate, through ante-natal care, the dangers associated with childbirth. But it was the working class family that was the central focus of neo-hygienism. Let us recapitulate the elements of this strategy.

Neo-hygienism sought to link two principal sites. Firstly, a site in which whole classes of individuals might be inspected. These inspections had a number of functions. They would pick up pathologies. They would analyse and organise the knowledge of populations so produced. They were linked into treatment, either undertaking it directly, or directing and monitoring treatment in home or school, or acting as a means of classification and distribution of pathological individuals to specialised treatment institutions - hospitals, special schools, sanitoria or whatever. The clinic was the principal place for performing these functions. In the clinic, conditions could be documented and recorded, norms could be established and individuals classified in relation to them, specific diseases or departures from norms of functioning could be identified, and certain signs could be read - lice, dirty necks, unclean teeth and so forth - which were important not so much in themselves but because they were symptoms of something else - poor

hygiene in the home.

The home was the crucial site of prophylaxis. The prophylactic site was where ill health could be prevented, and, crucially, where conduct which would produce good health could be promoted through the insertion of norms of hygiene. This could, to some extent, take place in the treatment institutions themselves, through the instruction of pathological individuals in appropriate modes of behaviour. It could take place in the schools through the utilisation of appropriate lessons and the inculcation of appropriate habits. But the home was the object par excellence of the neo-hygienist strategy. For it was here that pathological conditions could operate or be prevented as a consequence of hygienic management by mothers. And it was here that welfare could be promoted through the adoption of a correct dietary regime, and correct techniques of washing, cleaning, clothing, as well as the avoidance or suppression of such harmful habits as coughing, spitting and sneezing.

Inspection and prevention had to be linked in order that the detection of a sign in the clinic could lead to a rectification in the home, or in order that the development of these signs of pathology might be prevented by anticipatory action. The linkage could be effected in three principle ways: through the child; through the mother or through various welfare agents. It is worth discussing each in turn, for when the psycho-social strategy displaces neo-hygienism it entails a transformation in the way each is conceived.

The child was, of course, the stake in the whole business. What was the child for neo-hygienism? The answer must be in terms of the body. A body which conformed to normal standards of development in terms of height, weight, muscular co-ordination and so forth. A body unmarked by caries, rickets or incipient tuberculosis. A body

uninfested by lice, and free from the conditions in which such infestations might flourish. A body, therefore, which conducted its personal habits in a hygienic fashion. But a hygienic regime of the body did not limit its aspirations to the production of fodder fit enough for the demands of the battlefield or the factory. For the moralisation of the everyday which was entailed in the promotion of hygiene and welfare had effects more directly moral as well. The habits and conducts of the body which were to promote its physical welfare were also moral, in the traditional religious sense of rules of right conduct and in the nineteenth century sense of pertaining to the space of character. To promote physical welfare, the child was to be trained up in cleanliness, regular habits, avoidance of excess and intemperance and so forth. In this sense, the promotion of the 'mental hygiene of the mother and child was an essential element of the strategy. Neo-hygienism sought to instil personal responsibility for one's own health into this moral space - hygiene and welfare entailed the active co-operation of individuals in the promotion of their own bodily efficiency.

The role of the child was active in another sense as well. Inspected in the school clinic or moralised in the school curriculum, the older child could carry back to the home appropriate norms of conduct in matters such as personal cleanliness and the management of various bodily functions. However, these norms were to be effected principally through the agency of the mother, who was the key to the technical possibility of neo-hygienism. The neo-hygienist mother was not so much an individual as the embodiment of the home itself. As Newman put it in his report for 1914, "The environment of the infant is its mother".[16] Her role was to actualise the instructions of the pedagogues of home and child management in the regime of the home itself. She was, that is to say, a mere assemblage of habits - bad

budgeting to be turned into good, an indifference to household dirt to be transformed into a campaign against it, the use of feeding bottles and dirty dummies to be replaced preferably by the breast, but if not at least by instruments and contents duly boiled, diluted, delivered according to instructions. True, these habits were, as it were, integrated within and a product of character - ignorance and fecklessness to be turned into conscientiousness and responsibility. The efficient mother was one who conducted the tasks of welfare in an hygienic manner - and that was virtually all there was to it. It was true, as well, that these interventions into the family were accompanied by the construction of what is often termed an 'ideology of motherhood' - which stressed the duties and responsibilities of motherhood at the same time as according it an elevated status - woman's proper place was in the home, but motherhood was a craft, and domestic management a science, a skill which should be learnt, respected, rewarded. Mothers should take pride in being mothers, but the good mother's pride was in the accomplishment of tasks which, in themselves, carried no requirement of affect. The space of maternality was exhausted by the parameters of the hygienic duties assigned to the mother.

In this respect it is worth pointing out that if women were the particular targets of the neo-hygienist doctrines of motherhood, this was, in large part, merely because neo-hygienism believed that the nurturers of children were nearly always women. Of course women were particularly well suited for the task of providing for the welfare of babies, in virtue of the hygienic advantages of breast-feeding over artificial feeding, the minimisation of the risks of infection and the maximisation of the chances of the infant obtaining an adequate diet. But there was an important sense in which the relationship

between women and motherhood was almost contingent - a consequence of the fact that it happened to be the case that women looked after infants and children during the period crucial for their hygienic development. Perhaps Hibbert Hill put it most clearly, writing in the American context:[17]

> For the first 5,000 days of the years of life of each generation, the race is fed, dressed, undressed, washed, combed, cuddled, kissed, praised, blamed, led, driven, coaxed, taught, spanked, bossed and otherwise "brought up" by women - women mothers at home, women teachers at school. It is chiefly during this time of tutelage and supervision by women that children receive their infections; it is during this time that the race runs its gauntlet, dances its little dance with death - and pays ten billions for it.

The welfare of families

In neo-hygienism, the space between the family and the clinic was traced out by the operations of welfare work. Welfare workers established paths of interchange between the domestic, conjugal and child-rearing arrangements of working class families and the school, infant welfare clinic, hospital or other site of inspection or treatment. The emergence of a psycho-social strategy was conditional upon the existence of such a network of welfare, but it entailed its transformation. In order to understand this transformation, it is thus first necessary to characterise the operation of welfare.

During the inter-war period there was an impressive proliferation of social devices concerned to promote and regulate health, hygiene and welfare. The social devices were dispersed and based upon specific problems - in the field of public health,

education, the welfare of children, the penal system and so forth. Around these issues aggregated a heterogeneous series of agents, some employed by statutory agencies, some voluntary but attached to committees established by statute, some working for private charities or in other voluntary organisations. Professional organisations of these different branches of welfare work began to be set up, journals and books were published in great numbers. It was precisely the co-operation between different types of agency, between the voluntary workers and statutory agents, between self-help and social provision, that was seen by authors of the time as both the strength and weakness of a 'new philanthropy' that was regarded as characteristically British.[18] Yet despite all this activity, contemporary histories and accounts of social work pass over this period discreetly, regarding it as something of a hiatus between the individualised case-work of the nineteenth century - conceived of as the 'origin' or 'precursor' of modern techniques - and the burgeoning of a professional, statutory apparatus of social work after the Second World War. Why should this be? The reason lies in the discrepancy between the psycho-social familialism that characterised post-war social work and the rationale and strategy of the social apparatuses of the inter-war period.

Eileen Younghusband's investigation of employment of social workers, conducted at the end of the Second World War, allows us to make some sort of inventory of the social field.[19] If one disregards those schemes which had been established in war-time, one finds the following at the end of the inter-war period. There were health visitors, of course, who have already been referred to. There were almoners attached to hospitals. There were child-care workers attached to residential institutions of one sort or another - approved schools and hostels, remand homes, orphanages run by

voluntary societies (Doctor Barnardo's, National Children's Home and Orphanage, Church of England Waifs and Strays Society and other orphanages and homes run by religious orders). There were child care workers involved in visiting homes "in which a child is living because something has gone wrong, whether the 'something' be a need for dental treatment or criminal neglect of the child by his parents".[20] There were adoption officers working with courts with regard to the adoption of children for whom a local authority or voluntary society is acting as guardian ad litem. There were welfare and after-care officers visiting homes of those discharged from approved schools. There were care committees, concerned with follow-up work in connection with the school medical service and with children in need of clothes or school meals, with a paid organiser directing the activities of voluntary workers engaged in home visiting and liaising between home, school and clinic.

We also find moral welfare workers, often employed by the church, part paid by local authorities, who dealt with children living in conditions of moral danger or who had been the subject of sexual assaults. Juvenile Employment Officers were involved in vocational guidance ofyoung unemployed juveniles, and in finding them employment. School Attendance Officers were responsible for visiting the homes of children absent from school for any length of time, for undertaking enquiries for juvenile courts, supervising boarded out children committed to local education authorities as Fit Persons and undertaking duties under the Adoption of Children Act, 1926. Special Enquiry Officers performed similar tasks but were attached to the juvenile courts. And there were workers involved in settlements and wardens of community centres.

There were family case workers - most notably from the Charity

Organisation Society, but also from a range of other organisations including those formed for specific purposes such as the care of the handicapped, the single 'fallen' or ex-service personnel. Characteristic of all such case work organisations was that relief was provided to certain classes of persons based upon individual investigation and assessment of need, and with a view to promoting the self-reliance of those individuals rather than merely providing indiscriminate charity or small doles. There were voluntary associations for domicilliary assistance and welfare to the blind, to whom local authorities had devolved their responsibilities under the Blind Persons Act 1920, and others, with no statutory links, for the deaf and cripples.

There were probation officers, responsible to the local probation committees of the courts of summary jurisdiction in England and Wales, or, in the Metropolitan area, to the Home Office via the London Probation Service. Probation officers dealt with cases such as children brought before the courts as beyond the care and control of their parents and subject to supervision, children given a probation order for a minor offence, adults in similar circumstances, matrimonial problems and elderly persons charged, for example, with indecent exposure. There were Discharged Prisoners Aid Societies. Finally there were a few 'mental welfare' workers and psychiatric social workers employed by mental hospitals, by local authorities, by voluntary associations and by child guidance clinics and responsible for obtaining family histories, home visiting, after-care, domicilliary supervision of mental defectives in their homes or boarded out. We shall return to these in due course, for it is here that we will find the beginnings of a psycho-social alliance.

This social field was clearly heterogeneous in a number of respects. Firstly in respect of the formal status of the agents and

agencies concerned - statutory, voluntary and so forth. Secondly in terms of the mode of designation of their objects - a specific problem, a category of individuals defined by age or status, an institution or whatever. Thirdly in terms of the specification of their field of action - an individual prisoner living alone, a child in a residential institution, a family. But despite this heterogeneity, the nature and rationale of welfare work had a considerable consistency. We can see this clearly if we consider what some of these welfare workers actually did.

We may begin with the almoner. Almoners were first appointed in 1895. They had been suggested by Charles Loch of the Charity Organisation Society, in order to relieve strains on voluntary hospitals due to the abuse of out-patient departments and medical charity. Their role was to scrutinise hospital patients, assess home conditions and financial resources in order to ascertain those who were the proper responsibility of the Poor Law Authorities and the level of contributions which eligible patients should make towards hospital maintenance. The Hospital Almoners Association was formed in 1903; there were fifty members by 1919 and 343 in 1939.[21] As well as working in voluntary and municipal hospitals, by the thirties almoners were also employed by Public Health Departments and attached to clinics for tuberculosis and venereal disease. The role of the almoner was to act as a kind of relay between the patient and the medical site, be it hospital or clinic, the various professional groupings, public authorities and social agencies, statutory or voluntary;[22]

> The almoner supplies knowledge of the patient's circumstances, social as well as economic, both as a guide to what he can be expected to pay and for purposes necessary to treatment for the

use of the hospital staff; she serves as a link with all outside agencies - State, municipal or voluntary - which may be utilised for the benefit of the patient.

If one asks what the almoners did over and above this knowledge-relay function, one gets a fair idea of what the role of welfare workers in this period was. It entailed the giving of friendly and sympathetic information especially as to available benefits, facilitating attendance and continuance at hospital or clinic, diffusing instruction as to home management, cleanliness and hygiene, budgeting, debt and problems with obtaining suitable employment.

And as for the health visitor, her role was pretty much the same: to advise on the proper care, nurture and management of children under five including the promotion of cleanliness. Her tasks were clear from the regulations for training issued by the Board of Education in 1919. Courses were to cover: theoretical and practical instruction in elementary physiology; artisan cooking and household management; hygiene; infectious and communicable diseases; maternity; infant and child welfare; elementary economics and social problems.[23] Additionally, as Macadam says, the task of the health visitor, like other welfare workers, was to act as a liaison officer rather than a practitioner: the complexity of modern society had apparently called into being a new type of service - 'social work' or 'social administration' in order to establish rational linkages between different services.[24]

If we turn to examine the activities of Care Committee workers, we find a rather similar picture. George Newman advocated in his report for 1909 that such committees be established in each area to provide a crucial link between school, clinic and home. He described their duties thus:

To follow up the work of medical inspection, endeavouring to secure appropriate treatment for each child by encouragement and education of parents and, in suitable cases, provision of the means of treatment;

To endeavour to bring about in special cases permanent improvement in the condition of the home by regular visits of a friendly character;

To co-operate with the local education authority over meals for necessitous children;

To interest themselves in the employment of children about to leave school;

To participate in care and after-care in special schools, especially those for the physically and mentally defective;

To help inculcate in mothers the idea of the prevention of diseases among children by lectures or practical education work in the home.[25]

The welfare worker was thus a pedagogue and go-between, one who carried information, acted as a relay between different agencies, and served to inject norms of care and management into the home. 'Welfare' construed the family as a mechanism for the construction of physical health and sober habits, for the provision of clothing, food and shelter for family members. Hence welfare workers provided advice and evaluation in respect of finance, employment, housing, hygiene, diet, education, clothing, budgeting, the requirements of different family members - mothercraft, household management. And welfare agencies were the means of linking the family with the other specialised agencies involved in these issues - medical, housing, relief, school, court and so forth. At issue was the physical conservation and maintainance of the population at high levels of

efficiency, able to do its duty in industry or in war.

When the neo-hygienist strategy was displaced, a shift occured in the object, techniques and rationale of intervention into the family. The conditions for this shift were laid in the debates and concerns which emerged in the 1920s around a rather different question - that of disorders of behaviour as they manifested themselves in delinquency and misconduct. Here a new conception of the family, the child and the means and objects of intervention would take shape. Eileen Younghusband describes this as a move from welfare to social work.[26] She argues that this shift predominantly occurred after the Second World War, and the usual argument of histories of social work is that it was only after the Second World War that the individualised case work methods pioneered by the Charity Organisation Society were reactivated and generalised. This is variously put down to the 1948 Childrens Act; to the criticism of the consequences of separation of children from their families put forward in the Report of the Curtis Committee, in the writings of Bowlby and Anna Freud; and to the belated recognition of the input of psychoanalysis.[27]

It is certainly true that the psycho-social strategy found it difficult to get itself off the ground in the inter war years, but it is worth considering why this was, if we are to understand the particular form and limits of such success as it did have. The blockages on its development came from a number of sources. The deepening economic depression made it increasingly difficult to maintain the linkage between character and unemployment, and hence between character and distress. Even the Charity Organisation Society had to accept the necessity for 'out relief' and the fact that many cases of distress had as their sole cause the absence of

employment consequent upon conditions of trade.[28] The particular betes-noires of the proponents of individualised case work were the 'socialist' insurance based schemes which were being established for sickness, unemployment and old-age pensions. These effected a separation between the register of financial provision and that of personalised case-work with needy individuals and families, thus sidestepping the principle that relief should be conditional upon scrutiny and having the objective of establishing self reliance.[29]

Of course, the development of the schemes of unemployment benefit throughout the twenties was accompanied by debates over means-testing and scroungers, and the necessity and significance of a 'genuinely seeking work' test.[30] But the scrutiny that was carried out pertained, initially at least, only to willingness to enter paid employment and the nature and arrangements of the family unit were pertinent only in so far as they affected the financial status of the claimant. Relief was either given unconditionally or refused - there was no intermediary state of attempted individual reformation, although, towards the end of the inter war period, officers administering unemployment benefit were increasingly urged to assess willingness to enter employment in terms of "the state of the applicant's mind".[31]

The mode of analysis and intervention espoused by the proponents of case-work, with its emphasis upon individual responsibility and individual reformation, found itself very much on the defensive. For the middle class with a conscience, social service rather than scientific philanthropy was the order of the day. Social service located social evils not in the individual but in the structure of society itself, particularly in the unequal distribution of wealth. To work with the poor, in the Settlements or elsewhere, was an expression of citizenship, in which all parties enjoyed social

rights and equality of status. It gave those who would make policy first-hand experience of working class life. It helped to break down class barriers and to spread education and cultural values. And it involved the educated and the working class together in the project of constructing a better society.[32]

In the 1930s the notion of social service gave way to another which stressed the need for collective planning and management of all aspects of social and political life and the expansion of the social services - a middle way between capitalism and socialism. Political and Economic Planning (PEP), founded in 1931, stressed the need for efficiency and modernisation and centralised planning in its report on the social and health services and other issues.[33] The Next Five Years Group in the book it published in 1935, proposed an Economic General Staff, a National Development Board, public investment in housing and electrification, town and country planning, the location of industry in distressed areas, and the co-ordination of the social services to achieve a National Minimum.[34] Two areas are of special significance here, for they produced a relative decline in the prominence of neo-hygienism. Doctors and nutritionists began to stress the relationship between income, poverty, diet and health, as opposed to concentrating upon the part played by individual, family and maternal hygienic management.[35] And Eleanor Rathbone, a leading light of the Next Five Years Group, gained further support for the campaign for the endowment of motherhood.

This campaign had its origins following the end of the First World War and crystallised in Rathbone's The Disinherited Family of 1924.[36] It stressed the deleterious effects of the existing wage system on family and home life, especially on working class mothers and their children who were suffering severe undernourishment and

poor health as wages were unrelated to the needs of families. In the thirties, this campaign was linked in to a growing concern with the decline in the birth rate. Again the neo-hygienist strategy slipped from prominence as it began to be argued that, accompanying the fall in infant mortality which had been achieved in the twenties, there had been a reduction in the birth-rate from 28.3 per 1,000 in 1901-5 to 15.3 per 1,000 in 1931-5. Population projections predicted the 'twilight of parenthood'.[37] Economists and others adopted 'under populationist' positions and discussed the damaging effects of low population on empire and industry, and the consequences for the age structure of the population - with a growing number of old people supported by a declining number of producers.

But more worrying were the consequences of differential decline, with the greatest reduction in births and family size amongst the well-to-do and professional classes. Whilst the earlier negative eugenicist response to this was certainly present - with calls for compulsory sterilisation of defectives and so forth - as we saw in a previous chapter, this achieved little success. The campaigns for birth control promoted especially by Mary Stopes and the Society for Constructive Birth Control and Racial Progress, and later by the National Birth Control Association, were no more successful.[38] Their arguments tended to be positive rather than negative, stressing birth control as a means of securing the health of mothers and babies through the spacing of births, as well as its use to prevent the diseased and defective from procreating. Whilst Stopes advocated birth control as a means of advocating racial improvement and limiting the working class-birth rate, these arguments had little effect on government policies in this period. The old eugenic oppostion between the virtues of action at the level of procreation and the limitations of action at the level of environment had begun

to break down. A new 'positive eugenics' became active which combined the call for family allowances with the arguments that the provision of a basic minimum of food, clothing, shelter, medical care and maternity services would increase the welfare of families and children generally, encourage the thrifty artisans and professional classes to have more children, and provide an antidote to those forms of disorderly living which promoted excessive and dysgenic breeding. Universalism of provision no longer produced the fear of promotion of reckless breeding amongst poor and degenerate stock and its consequences.

The new strategies of planning, insurance, allowances and so forth were thus not linked to a system of individual scrutiny and reformation. They turned problems of health and welfare into technical questions of types and levels of allowances and benefits, generalised provisions of services, and their consequences at the level of the population. But the effect of all this was not wholly antithetical to the emergence of a psycho-social strategy. For in effecting a separation between the register of financial provision and that of personal case-work, they freed the level of personal and familial malfunctioning for its elaboration within a discourse and practice in which material difficulties were symptoms of a problem rather than the problem itself. It was here that the new social work would form, initially through the application of the new language of hygiene and welfare to problems posed by disorders not of bodily function but of conduct.

The hygiene and welfare of the mind

> [The] common feature [of that derangement of conduct which is the symptom of mental illness] is the inability to maintain his

> social equilibrium ...[But] insanity is, after all, only a disease like other diseases ... a mind deranged can be ministered to no less effectively than a body deranged ... The keynote of the past has been detection; the keynote of the future should be prevention and treatment ... The problem of insanity is essentially a public health problem to be dealt with on modern public health lines.
>
> Royal Commission on Lunacy and Mental Disorder, 1926 [39]

Neo-hygienism sought to promote health as a social value to be maximised and as a personal responsibility to be fulfilled. When such a strategy was applied to mental pathology in the period following the First World War, it had consequences for conceptions of madness and the social responses appropriate to it. New tactics for the social regulation of disorders of conduct were constructed within a strategy of mental hygiene and mental welfare. And the new problems of childhood, which individual psychology would attempt to address, were shaped within this strategy.

From the first Report issued by the Board of Control after the First World War, through the Report of the Royal Commission on Lunacy and Mental Disorder of 1926, to the Report of the Feversham Committee on the Voluntary Mental Health Services published in 1939, mental hygiene and mental welfare set the terms of analysis and proposals.[40] The link was maintained between mental disturbances and criminality, immorality, unproductiveness and so forth - forms of conduct unified as 'socially inefficient'. But this link was reconstructed in terms of the new preventive and hygienic medicine of public health. Mental hygiene and mental welfare were construed as attributes of the population to be maximised, and mental illness as a source of

inefficiency to be minimised, in order that society could function at its highest efficiency.

Crucially, it was argued that major mental disturbances were preventible by early recognition and treatment of all the minor troubles from which they grew, and by promotion of correct habits of mental hygiene in the family. One certainly needed medical investigation of persons who were clearly socially inefficient, such as those who had broken the law, to see if their conduct was a consequence of mental pathology and therefore required treatment. But one needed to extend the field of surveillance in order to pick up minor troubles before they developed into major ones. This could be done by linking up, co-ordinating and educating the various statutory and voluntary agencies who might come into contact with such individuals. It also required the development of new sites of treatments; of measures to encourage individuals to scrutinise their own mental state, and that of family and friends, for signs of minor trouble; and the development of the obligations and opportunities for those with mental disturbances to have voluntary treatment. Mental welfare was to be a new objective of social regulation. It was also to be a family responsibility and a personal value.

A number of interlinking arguments were put forward, all of which had the object of removing constraints and hinderances upon the early recognition of disturbances of the mind, with a view to promoting early intervention and remedial action. Two related problems were seen to be standing in the way of the promotion of mental welfare. The first was the stigma surrounding lunacy. The second was the disjuncture between the nature of provision for disorders of physical function and those of mental function. Not only did the elaborate legal measures surrounding admission to a lunatic asylum, the association with the Poor Law and so on, serve to

prevent ill individuals obtaining early help, they also made it difficult for doctors to provide it. The 1890 Lunacy Act had allowed asylums to take only certified patients, and certification could only be accomplished with the direct involvement of the legal authorities - Justices of the Peace. This, it was argued, prevented early treatment of mild cases, discouraged doctors from utilising asylums, and turned asylums into places of incarceration for those considered beyond hope.

The key move in the new strategy of mental hygiene was to establish the continuity of disorders of mind and body, and hence to try to extend to the former the new preventive and therapeutic techniques which had worked so well for the latter. "Lunacy" was a particular form of illness and not a condition which should be separated off, stigmatised, feared. It should be treated in institutions which had as their model not the prison but the general hospital, for they were places for the treatment of a type of disease. In any event, it was argued, the separation between the mental and the physical was misleading - all mental disturbances no doubt had physical concommitants, physical disorders had mental concommitants, and in many cases it was a matter of judgment which predominated. So lunacy should be termed mental illness - a disease whose symptoms were mainly derangements of conduct rather than of physical function. And asylums should be mental hospitals - hospitals specialising in the treatment of certain kinds of disease.

This would not only be a correct recognition of the nature of the disorder, but it would also facilitate mental welfare by removing the stigma associated with the old terminology, which had discouraged individuals from seeking assistance. The fears concerning the liberty of the subject which had underlain the legalism of the 1890

provisions were clearly no longer appropriate; what was involved raised no more problems of liberty and its infringement than did the measures which were routinely taken in the treatment of disorders of physical function. The whole legalistic paraphenalia which required certification before treatment was an anachronism which acted as a drag on the promotion of mental health. Treatment should be available on an in-patient basis without certification in public hospitals.

But further, clinic-based facilities for out-patient treatment of those with mild disorders should be set up as a means of preventing the development of mental illness by the treatment of those with incipient insanity; general hospitals should themselves participate in this activity which did, after all, simply represent one of their specialisms. To these clinics, people would come voluntarily, once educated in the recognition of the early signs of mental illness, free of fear as to stigma or incurability; taking responsibility for their own mental health. These clinics would also act as the bases for a more extensive system; they would be centres into which individuals would be directed, and from which other mental welfare activities would radiate. Welfare workers, statutory and voluntary, and other agencies, once properly aware of the links between mental illness and social inefficiency, would direct individuals to the clinics for assessment and treatment. The new mental medicine would radiate out of its institutional sites and begin to act also upon the circumstances and conditions of the lives of patients, ex-patients and potential patients. There was to be mental after-care, there was to be work with out-patients, there was to be enquiry into the home circumstances and lives of patients, and there was to be general public education as to the habits likely to promote hygiene of the. To this end there should be co-ordination of

the various statutory and voluntary bodies concerned with different aspects of the problem in order to promote a coherent and exhaustive programme of mental welfare.

The new strategy did not remain merely at the level of recommendations. It was instantiated in the construction and objectives of the Maudsley Hospital. The building of this hospital was completed in 1915 by the London County Council, with an initial gift from Henry Maudsley which included the conditions that the hospital should deal exclusively with early and acute cases, have an out-patients department, and teach and research on psychiatry in the context of medicine. The strategy underpinned the use made by the London County Council, from 1919, of the Mental After-Care Association, to carry out early-care and after-care work. It was what led to the change of name and tactics of the Central Association for the Care of the Mental Defective, which became the Central Association for Mental Welfare in 1923, and changed the title of its journal from Studies in Mental Inefficiency to Mental Welfare in 1925. When the Royal Commission on Lunacy and Mental Disorder was set up in 1924, it appears that it was principally intended to allay public anxiety over safeguards, administration and conditions of detention in lunatic asylums. But the recommendations which it made were in line with the strategy of mental hygiene; they were put into legislation in the Local Government Act 1929, which gave local authorities a wider responsibility for providing lunacy and mental deficiency services , and in the Mental Treatment Act 1930. This Act renamed asylums 'mental hospitals' and lunatics became, in most cases, simply 'persons of unsound mind'. It allowed the reception of patients into in-patient treatment on their voluntary application. And it authorised local authorities to make provision for the

establishment of psychiatric out-patient clinics at general or mental hospitals, and to make arrangements for after-care. Soon after the outbreak of war, effect was given to the recommendation of the Feversham Committee, to set up a National Council for Mental Health to co-ordinate the voluntary societies, and to work in partnership with the statutory authorities, in the fields of after-care, work with mental defectives, early treatments and children's troubles with the law and at school.

The strategy of mental hygiene also underpinned the establishment of the provisions which we will discuss in more detail in the next chapter - private psychiatric out-patient clinics such as the Tavistock Square Clinic founded in 1920, the Child Guidance Council, set up in 1927, and the Mental Health Course, for training psychiatric social workers to be based in the new clinical sites, which started at the London School of Economics in 1929. And it was this strategy which the National Council for Mental Hygiene sought to co-ordinate and promote in the inter-war years.

The National Council was founded in 1922 and included an array of prestigious names amongst the membership of its various committees.[41] The ability of the strategy of mental hygiene to provide a new framework for debates concerning mental disturbance is exemplified in the fact that the active members ranged from psychoanalysts, through individual and industrial psychologists, to organicist psychiatrists, doctors, magistrates and welfare workers. The prestige of such an enterprise is indicated by the proportion of these who were, or would be, knighted or otherwise honoured by the Crown. The Council sought to promote the study and effective treatment of mental disorder with a view to its prevention, to introduce the routine medico-psychological examination of persons charged with crime and to investigate the role of mental disease or

defect in other forms of socially undesirable behaviour. But it also sought to promote positive measures for the development of mental health, to educate in the factors producing good mental health and to remove all barriers which made early treatment of mental disease more difficult - including the the stigma around 'lunacy' and the legal constraints which inhibited those in need from seeking help. It particularly worked for the establishment of out-patient facilities.

Its rationale for all this was straightforward - major disorders had precursors in minor disturbances, early treatment of the latter would reduce the incidence of the former. Thus an Appendix to the Annual Report for 1927-8 sought to draw attention to the inadequacy of provision for those suffering from 'Minor Mental Maladies' or 'nerves', that is: "emotional or mental instability characterised by such insidious and apparently trivial symptoms as depression, anxiety, impaired powers of initiative and concentration, loss of interest, irritability, self-distrust, sleeplessness, hypersensitiveness, shyness and seclusive tendencies, hysterical manifestations - the latter especially in the young - and other symptoms of a like nature."[42] These apparently trivial symptoms were insidious not on their own account but in what they pointed to and would lead to - they were often the early stages of much more severe disorders. But fortunately new methods had demonstrated that treatment, if carried out early enough, had a good chance of success; hence it was vital to encourage all measures to increase the availability and likelihood of early treatment.

Nowhere was it more important to recognise these issues than in relation to the disturbances of childhood. Here were the earliest signs of future trouble manifested; here were the chances of averting such problems greatest. And here, in childhood, in the school, was

the oppportunity for a universalised scrutiny of conduct with a view to identifying problem cases. It is in this light that we can understand the emergence of the new objects around which the psycho-social strategy would form - the maladjusted schoolchild and the delinquent juvenile.

The maladjusted schoolchild and the delinquent juvenile

What made the maladjusted schoolchild and the delinquent juvenile possible objects for a psycho-social strategy was the way in which they were linked. Starting soon after the end of the First World War a regular connection in argument began to be made between children who showed disorders of behaviour at school and children who would later end up before the courts. The disturbed schoolchild would become the juvenile delinquent, the juvenile delinquent was, or had been, also a disturbed schoolchild. If this was the case then the detection and treatment of disturbances of behaviour in the school had a significance beyond itself, in its preventive and prophylactic function. The school could now be seen as a generalised site of scrutiny and intervention with regard to problems not of physical health and deterioration, not of intellectual defect and degeneration, but of all sorts of social inefficiency resulting from mental illness. If it was the case that what ended as major disorders in the moral sphere - disregard of the law and criminal behaviour - began as minor disturbances in the moral sphere - anything from excessive emotionality to minor transgressions such as lying - then the school had as important a function in crime prevention as it did in the promotion of physical health and the recognition of mental defect.

This new class of problem child emerged hesitantly at first but then with growing consistency and systematicity alongside classes of problems associated with physical or sensory handicap, ill health or weakened physical constitution. Initially designated nervous, neuropathic or unstable, this class of children came to be referred to as 'mal-adjusted'. One can trace this emergence from the successive reports of the Chief Medical Officer of the Board of Education. In 1920, the Chief Medical Officer drew attention to the

neuropathic child, who could be found throughout the educational system but without any special form of treatment being available. Neuropathic children might be normal or even super-normal in school progress, but their behaviour was "marked by certain psychological characteristics, a tendency to quarrel, to make violent friendships, to engender bitter dislikes, to attend unduly to [their] bodily functions, to night terrors, to unreasonable fears, grief, abnormal introspection and self-examination, and to separation from family and friends."[43] Whilst these behaviours were often accompanied by minor physical symptoms, the condition was a psychical one and school life itself, as well as sympathy and relief from strain, might bring about recovery. However more support to education was required from the medical psychologists, to determine "(i) How far are we in possession of all the psychological phenomena associated with abnormal childhood? (ii) To what extent are these phenomena associated with pathological conditions arising in the sense organs, the nerve paths or the cerebral cortex? (iii) What is the relation of these conditions to heredity, environment and maternal nurture?"[43]

By 1927, it was the specific link with delinquency which was prioritised. Apparently Healy's work with delinquents in the USA had "revealed how long and complicated, in many cases, was the history behind the delinquent act, and attention was drawn to abnormal traits in behaviour generally as they showed themselves in childhood".[44] The Chief Medical Officer pointed out the limited resources available in England for dealing with such children, resources which would ideally, it appears, be used to set up a 'child guidance clinic'. The conception of a child guidance clinic, as promoted by the Child Guidance Council, and as established in a number of places in the mid nineteen twenties, rapidly set the terms

in which the educational issues posed by 'unstable' and 'difficult' children were to be posed and organised. The difficult child was conceptualised, more and more, as 'mal-adjusted'. In the words of the Child Guidance Council, quoted by the Chief Medical Officer in his report for 1928, this was a child "whose conduct in school and home reveals a lack of harmony and stability leading to delinquency or nervousness".[45] We shall return to the Child Guidance Council in the next chapter. As far as the Chief Medical Officer was concerned, the child guidance clinic was to play the role with regard to mental hygiene that the School Medical Service filled with regard to physical hygiene. If the latter sought to ascertain and treat early and slight departures from the normal in order to prevent them becoming major defects, the primary duty of the child guidance clinic was "the ascertainment, study and correction of minor abnormalities, which if left to themselves, may eventually lead up to gross abberations of conduct, delinquency and crime".[46]

By the time of the Report for 1930, the Child Guidance Clinic was given a section on its own, within which were subsumed two principal classes of problem - the mentally retarded child and the mal-adjusted child. The priority once accorded to the former was now slipping towards the latter. And it was the link which had been established with gross disorders - especially crime - and hence the role of the school as a site for scrutiny and preventive intervention with respect to them, which gave the issue of 'mal-adjustment' its particular saliance:[47]

> Conditions which lead to the reformatory, the prison, the hospital or the asylum may have been developing during school life and ... accordingly manifestations of persistent abnormalities in behaviour or of "mal-adjustment" in children demand the close attention of the school medical officer.

Thus all these minor deviations of behaviour gained their pertinence less on account of the disruption which they constituted to the normal activities of the school, than because of the sign which they fortunately gave of the imminence of future disorder. Abnormal behaviour, antisocial conduct, neuroses, eccentricities, making friendships too easily or not at all, quarrelling or being withdrawn, grieving or fearing too much or too little - all these departures from the norm could be linked together as 'mal-adjustments' and as predictors of troubles to come. If this linkage was thinkable largely through the conceptions of mental hygiene discussed earlier, and owed something to the work of psychologists like Burt, the studies of various school medical officers, and the importation of the American programmes of Healy and others, it also had conditions within the penal system itself, most particularly within the Juvenile Courts.

It is, no doubt, true that there was a long established connection between criminal forms of juvenile conduct and other aberrant conduct which was not in themselves criminal but might lead to criminality if left unchecked. It is commonly accepted that the conception of juvenile delinquency began to emerge in the mid-nineteenth century.[48] In the eighteenth century and early nineteenth century, the criminal child was treated in the same way as an adult, subject to the same processes of trial and the same punishment on conviction, graded by offence and precedent.[49] Magistrates did exercise discretion in the commutation of capital sentences to imprisonment or transportation for children, but they did so for adults as well.

The only exception concerned the principle of doli capax. When a child was proceeded against at law it was considered to be merely a

juridical subject, that is, the subject of an act deemed to have transgressed a given law. To be the juridical subject of such an act, however, it was necessary to be competent to bear the rights and responsibilities of such a subject. A juridical subject must be able to distinguish right from wrong and hence form a guilty intention. There was thus a strict analogy at law between children below the 'age of discretion', madmen and natural fools, to the extent that they were all incapable of forming such an intention, and hence could not be found guilty of a criminal offence. Whilst the judgments in English law up to the beginning of the nineteenth century were inconsistent, from Blackstone onwards the arguments of jurists tended to stabilise.[50] Children below the age of seven were automatically deemed incapax; over fourteen they were deemed capax unless proved insane. Between seven and fourteen, the prosecution had to demonstrate the existence of discretion. Of this period, Blackstone wrote:[51]

> By the law, as it now stands, and has stood at least since the time of Edward the Third, the capacity of doing ill, or contracting guilt, is not so much measured by years and days, as by the strength of the delinquent's understanding.

Russell, in 1819, stated that the prima facie presumption between fourteen years and seven diminished with the advance of the offender's years. If evidence of malice could be shown, this would "supply age" and "if it appear to the Court and jury that the offender is doli capax, and could discern between good and evil, he may be convicted and suffer death", although the sentence of death would often be remitted and the child pardoned with conditions, for example, of entry into His Majesty's Sea Service.[52] Whilst under the Code Napoleon in France it would appear that it was customary to seek

expert opinion on the state of development of the discriminative faculties of infants, in England, the matter was left to the judge and jury to decide on the basis of such factors as malice, revenge, craft, cunning, other evidence of a mischievous discretion and the extent to which punishment was a necessary deterrent for a particularly heinous crime which children were both capable of and tempted to commit.[53]

As execution and transportation gave way to imprisonment in the early nineteenth century, children were intermingled with adults in the prisons. Reform took as its theme mass corruption; children and other juveniles did not appear as a separate class, and the prison reforms of 1823 introduced a classification not by age but by nature and seriousness of offence. The opening of Newgate in 1842 marked a shift in the aims, objects and techniques of punishment.[54] Punishment now sought to transform the convicted individual through the detailed regulation of time, space, visibility and activity, in an exercise in which the imprisoned person was constantly subject to a normalising judgment - the evaluation of behaviour in relation to norms of conduct and techniques of rectification. The reformatory prison was individualising - it focused not upon the act or even upon the offender, but upon the delinquent as a personality, and it directed its action and evaluation to that moral space of character which organised action and was liable to reformation. Hence this type of prison entailed the assessment and distribution of offenders to the types of regime most appropriate for their reformation. Prisons now began to be indicted for the specific effects which they had upon the young: they were not reformed but 'hardened to prison life'; imprisonment scarred them with a stigma which made respectable employment more difficult to obtain and forced them back into crime; detention was too short for reformation but long enough to remove the

fear of prison; in addition, state maintenance of children in jail acted as a premium upon parental irresponsibility.

The moralising philanthropy of the mid-nineteenth century, singled out young actual and potential criminals as a special class. With the rise of the statistical societies, the setting up of a regular police force, the division of large towns into police districts, and the gathering and publication of figures on the quantity and distribution of crime, it began to be argued that juvenile crime in particular was on the increase.[55] Moral topographers sought to link this to the moral and physical milieu, conceptualising criminality on the model of the causes and spread of epidemic diseases. Thus William Beaver Neale, writing in 1840 of Manchester, argued that there existed a class of juvenile delinquents concentrated in a particular area where moral and physical contagion, encouraged by parental irresponsibility and neglect, led children to delinquency, petty theft, and ultimately a life of organised crime.[56] And Mary Carpenter argued that crime diffused "a subtle, unseen but sure poison in the moral atmosphere of the neighbourhood, dangerous as is deadly miasma to the physcial health."[57] The child was seen as a complex of learned habits which were contracted from the examples given in the home, from bad company, and from experience of vice and corruption in the streets.[58]

Reformers in the last half of the nineteenth century established a separation and relation between two classes of children. On the one hand there were those who were already 'dangerous' - who had committed an offence of some sort and who, if left in the immoral atmosphere of the rookeries and dens of vice would spend their adult lives as paupers, prostitutes or felons. On the other hand, there were the children in danger, 'perishing' as

Mary Carpenter terms them - without homes, in bad company, neglected by their parents or lacking discipline in the home. Despite the fact that they had not yet committed a crime, they were incipient criminals; further exposure to moral contagion would demoralise them still further, and make criminals of them for life. A series of Acts over this period, beginning with the Reformatory Schools Act, 1854 and the Industrial Schools Act, 1857, empowered magistrates to commit such children to Reformatory and Industrial Schools respectively. The schools were voluntary but were given legal powers to contain and control, subject to certification and inspection. They were based upon institutions already in existence. Reformatories were modelled on the agricultural colony established at Mettray, France in 1839; industrial schools on the so-called 'ragged schools'. By 1894, 17,000 children were in industrial schools - not simply vagrants, those who frequented the company of thieves, without settled abode or having no visible means of subsistence, but also those deemed 'in need of care and protection' and 'beyond parental control'; a further 4,800 were in reformatories. In each of these types of school the principles were the same. The children were to be resocialised in substitute family and cottage based systems, away from their old haunts where their old habits could be be broken down and new habits of honesty, discipline and industriousness could be inculcated through the application of a sort of moral treatment.

At one level, the famous Children Act, 1908 represented merely a continuation and extension of this strategy.[59] It further attenuated the relations between the prison and the juvenile. It maintained the distinction between Industrial and Reformatory schools and the separate circumstances under which magistrates could commit children to each. It applied to children the provisions of the Probation of Offenders Act 1907, allowing the court to discharge an

offender who voluntarily entered into recognisance to be of good behaviour, and allowing this to be subject to certain conditions, including that the offender be under the supervision of a probation officer for a specified period. This probation officer was to visit or receive reports from the person under supervision at reasonable intervals, to see that he observe the conditions of his recognisance, to report to the court as to his behaviour, and to advise, assist and befriend him and, where necessary, endeavour to find him suitable employment. The Children Act also consolidated the various pieces of legislation concerned with infant life protection - inspection of people other than parents looking after infants, laws on neglect, cruelty and sexual or economically prohibited use of children, and their access to alcohol and tobacco. And the establishment of Juvenile Courts was a further move to separate delinquent or neglected children from the taint of the adult criminal justice system. But in consolidating the legislative provision around children, in establishing a discrete site of adjudication and disposal in the Juvenile Courts, the 1908 Act provided the conditions for a shift in the way in which regulation of children and families would occur.

Throughout the nineteenth century, social regulation of the family had entailed a discontinuity between the promotion of morality in the household itself and the coecive action of the penal-legal apparatus. The former was undertaken by private philanthropic activity, having as its concern a perceived breakdown in the moral order of the cities, and seeing the family as a potential means of action upon those deficiencies of character manifested in prostitution, intemperance, vice, indigence, adult and juvenile crime, and pauperism. Leading activists in this field were those

bourgeoise women who had themselves been so recently inculcated with all the virtues of domesticity. Women from the various voluntary charitable organisations, 'missioners' attached to the courts and sanitary organisations, housing reformers associated with the name of Octavia Hill and others sought to construct the family as a moralising apparatus. The poor were to be encouraged to marry, not because of an affront to Christian morality, but as a means of producing responsibility. Marriage was to control and restrain the moral and financial profligacy of men and women, and household economy was to be enjoined as a moral duty. The mother was to become the agent of moralisation - attracted from the streets and the gin palaces into a domestic unit, her role supported and valorised. The adult male was to be attributed responsibility for financial provision, thus promoting prudence and dicouraging him from indulging in gambling, drinking, brawling and all sorts of vice and crime. The child was to be inculcated with the habits of industry, self-reliance, discipline and temperance, its behaviour was to be watched, checked and monitored through the agency of its mother. The object was to promote a private, domesticated unit which would be self-reliant and so organised as to 'automatically' prod-uce in its members the responsibility to care for themselves rather than placing burdens upon the state.[60]

But there was a disjuncture between this philanthropic moralisation of the family and the element of compulsion provided by the machinery of government. Initially, in the Reformatory and Industrial Schools Acts, it was only when the child had been found by a court to be in moral danger itself, or a danger to others, that the voluntary activities of moral familialism were provided with a coercive back-up. The child could be removed from its family and placed in an institution for its moral reformation.[61] As concern

began to focus on the consequences of the decline of the birth-rate, it became posible for a new problem to emerge for government by law. This concerned the deaths of children in foundling homes or being reared for gain - on account of the squandering of national resources which was involved. Measures of compulsory regulation of children outside their families were initiated in the Infant Life Protection Act of 1872. Much of the argument concerning these measures focussed upon the issue of the rights of the State to intervene into matters of parental duty, the consequences both for the freedom of the individual and for the sense of responsibility which parents felt towards their children. And the same arguments were used in the debates which finally led to the passage of the first Act allowing compulsory intervention into the details of the upbringing of children in the 'natural' home itself - the Prevention of Cruelty to Children Act of 1889.[62] However these compulsory measures discreet and dispersed, families only coming to light as the result of investigation by the voluntary organisations, or through contact with relief agencies or the police. And the role of the state was limited to negative intervention in cases of intractable failure. This involved the removal of the child and the disabling of the family unit, which was the 'natural', but not unique, locus for the preservation of life and the inculcation of morality. Its essential functions could be reproduced elsewhere - in a substitute family or reformatory institution.[63]

With the new configuration around the Juvenile Court, there was no longer a disjuncture between coercion and moralisation, or between different measures concerning different aspects of the troubles of children. The magistrates in the Juvenile Courts now received before them children who, by virtue of their separation from others

appearing in the courts, and the common procedures and provisions applying to them, could be seen as a single group which extended all the way from those neglected or in need of care and protection on the one hand to those who had committed serious crimes on the other - a continuous dimension of unfortunate children. And the magistrates had before them an analagous dimension of disposals, ranging from unconditional release, through release on condition of accepting supervision from a probation officer whilst living at home, through to removal into an institution. The Juvenile Courts thus established the linkage between familial scrutiny and moralisation on the one hand and the penal system on the other which remains until today; Far from restricting the incidence of penality in relation to juveniles, this provides a coercive back-up to a range of 'voluntary' interventions into the lives of families and children - a back-up which is necessary for those interventions to operate.

In the 1920s, the arguments put forward by magistrates, probation officers, the Home Office Children's Branch and the Reports of various committees of enquiry were remarkable for their consistency. The terms of their analysis were enshrined in the Children and Young Persons Act, 1933. Let us enumerate the principle elements. Firstly it was argued that probation with supervision was the first choice with respect to children coming before the Juvenile Courts and institutionalisation was only a last resort. When probation had become available it resulted in a sharp decline of the numbers of children committed to Reformatory or Industrial Schools, principally on the grounds of its relative cheapness. The use of such financial criteria was generally deprecated - if probation was to be the choice, it was because it was a more effective preventive strategy than committal to an institution. Whilst attempting to allay the anxieties of the Voluntary Societies and those employed in

the homes, who were confronting a dramatic decline in the demand for their services, the reports of this period repeatedly stressed that commitment to a home was appropriate only when probation had failed or had no chance of success - the option should be maintained as a warning to those on probation of the consequences of disobeying their conditions, but nonetheless a check on juvenile delinquency was best effected by supervision 'in the open' rather than reformation in isolation from the home environment.[64]

Next it was argued that the distinction made by legislation between the neglected child and the delinquent child was an artificial one. It was merely a matter of chance whether a child came before the court as a wanderer or a thief, and hence the distinction in the ways in which they could be dealt with, between Reformatory and Industrial Schools, made no sense: "The tendency to commit offences is only an outcome of the conditions of neglect and there is little room for discrimination either in the character of the young person concerned or in the appropriate method of treatment."[65] In each case the particular behaviour involved was not the issue - the act, whether it be crime, vagrancy or truancy, was not so much a problem as a symptom. The magistrates looked to the psychologists of the individual to provide the conceptual back-up for this position. William Clarke Hall for example, made liberal use of the work of Goring, Burt and in particular Maurice Hamblin Smith:[66]

> Too much importance must not be attached to the nature of the offences committed by the younger children. It matters little whether a boy or girl of twelve is charged with 'found wandering', petty larceny or persistant truancy... In nearly every case the root cause of the trouble is the fact that the child is living under such home conditions as have not led to a

right upbringing... Under right influences most children respond and do well... The treatment of the young offender is entirely a psychological problem.

As far as magistrates and probation officers were concerned, a systematic way of understanding the behaviour of children coming before the Juvenile Courts and the appropriate types of treatment for them had been produced. The first Report of the Home Office Children's Branch was typical in arguing that too much importance should not be attached to heredity. The majority of offences were committed by normal children - whatever the offence or reason for the child appearing before the court, in nearly every case the root cause was that the child was living under such home conditions as had not lead to a right upbringing and, in particular, home conditions which had not trained the child to control its impulses. What this amounted to was the conclusion that the causal factors of juvenile crime could be divided into two. On the one hand there were 'inherent' causes, to be located in the child itself. Physical factors such as chorea, epilepsy, encephalitis, syphillis, defects of vision, hearing or speech, tuberculosis, enlarged glands or mental defect were sometimes, though rarely, involved. More pertinent was what the 1927 Report referrred to as the 'mental equipment' of the children - conceived on a neurological model or in terms of the over-development of the instincts. We will consider this way of formulating the problem in the next chapter.

On the other hand there were the 'external' causes - that is to say 'environment'. William Clarke Hall was typical in listing these in order of importance as: parental neglect, bad housing conditions, bad companions, want of rational amusement, defective education, want of employment, special temptations and poverty.[67] It was these

external causes which acted on the congenital characteristics of the child to construct a character of a certain type. Within such an analysis, considerable importance was accorded to the home, which was conceived of as a space of training, a place where the child would be taught or not taught to control his impulses. But the home was just one part of the 'environment' which all contributed to the training of character; family relations were pertinent only in the lessons which they taught the child in duty, respect for property, habits of obedience and so forth. If crime was a mental symptom of a psychological problem, this problem was, therefore, the lack of training to control impulses. The psychological domain was thus construed as the place where impulses existed and control mechanisms could be installed. Treatment was to compensate for the early absence of such controls by providing the correct 'influences' which would enable the young delinquent to control his impulses.

These questions of causation and treatment were important because of the role which the juvenile court now sought to claim for itself. It sought to become an instance which made its decisions upon the basis of 'the welfare of the child', and which decided in relation to that objective on an appropriate mode of 'treatment' of the children that appeared before it.[68] Proponents of this strategy referred themselves to the Gladstone Report of 1895. The principles of reformation and treatment which it had proposed as the general rationale of the system of administration of justice must, it was argued, be applied with even greater force to the young offender whose character was still plastic and thus the more readily moulded by wise and sympathetic treatment.[69] Thus children were not to be 'tried', 'convicted', 'sentenced' as criminals - "what is needed is not the dramatic staging of a trial for a crime, but the provision of the best means for ascertaining and remedying evil tendencies" and

the question should be "not 'what has the child's past conduct deserved in the way of punishment?' but 'what past conditions have led up to this conduct?'"[70] Cyril Burt put it thus in an article in 1929:[71]

> The question that has to be asked is not - who committed this crime? but - why did he do it? Investigation is still essential; but the point to be investigated changes. A psychological rather than a judicial enquiry is the primary need.

The child was now to be treated not on the basis of what he had done but on the basis of who he was - and the psychological jurisdiction which the juvenile court sought would allow the new psycho-social strategy to get off the ground.

A treatment rationale for the juvenile court had a number of implications. Firstly, individualisation. Although delinquency occurred in the mass, it had to be treated in the individual. Secondly, diagnosis. For how could treatment be administered without a knowledge of the cause of the illness? Magistrates had before them a variety of children who for particular reasons required treatment, and a range of options for disposal by which that treatment could be effected. Not only did magistrates need to be specially trained for this task of diagnosis, but they also needed to be supplied with information in order to make it. To treat it was necessary to <u>understand</u>.[72] It is thus that the juvenile court begins to establish relationships between a number of previously dispersed elements. Officers of the local education authority were required to provide the courts with information as to the home conditions, school career and medical record of the child.[73] Probation officers were, where necessary, to make special enquiries into the home and family

background. Children were to be remanded in special remand homes, where the probation officers could visit them in order to get to know the character and tendencies of children who might eventually be placed under their care. And in these homes the children could be systematically observed and thoroughly examined as a matter of routine before being brought to the court for a decision. The routine psychological examination of children had been urged not only by Hall and Burt, but by Sir Robert Armstrong Jones, Dr Hamilton-Pearson, Dr MacNamara, Margery Fry, the People's League of Health, the National Council for Mental Hygiene, the Juvenile Organisations Committee and the Home Office Departmental Committee.[74] William Clarke-Hall had introduced it into his court very early on, Burt and Shrubsall had examined children in the London County Council area when requested by the courts, and the Tavistock Clinic had established a tradition of giving free advice to the Shoreditch Court. The Home Office Departmental Committee made a special point of this - arguing that children from well-to-do families who were delinquent at school or elsewhere were examined by specialists, yet those children who appeared before the courts were often suffering from the same causes and it was not right that the mental aspect be ignored in the treatment of their case.[75]

Around the children in danger and the dangerous children, around the juvenile court, a new strategy had thus taken shape. It was one in which the court would act to bring into relationship previously dispersed practices of investigation and regulation of childhood behaviour, family life and transgressions of the law. The criminality of children had become the symptom of a psychological problem, minor disturbances of behaviour had become precursors of later criminality, each sort of problem had its origin in defects

within the home. The role of the agencies of social regulation in respect of these problems was not one of punishment but of treatment, and treatment required knowledge not of the child had done, but of who the child was. What was it in his life, in his personality, in his constitution, in his experiences in the domestic domain, which had caused this particular bit of aberrant conduct? The allocation of the child amongst a range of possible disposal options required the court to be provided with information of two types. Information as to the child itself to be provided by a psychology of the clinic. Information as to the home circumstances to be provided by welfare work. Psychologists and welfare workers together were to provide the court with the information it required in order to understand the child sufficiently to make its diagnosis and decide upon its treatment. And later a new psychology and a revamped welfare work together would act in relation to this treatment as well. For the new technique of probation allowed the child to be maintained in the home under supervision - a supervision which had as its object the elimination of all those malign influences which led to the disorder of conduct, and the substitution of beneficial ones. The supervision was voluntary, but default entailed the activation of compulsory measures to remove the child and place it in an institution. The compulsory measures had an effect which was both psychological and practical. On the one hand they were a warning to the child and its family as to the consequences of disobedience - breaching the terms of the recognisance or failing to satisfy the probation officer as to their reformatory zeal. On the other hand, when removal to an institution did occur, that institution could substitute for the family by providing the right environment for the child to learn to control its own impulses.

Through its alliance with the juvenile court, individual

psychology had begun to establish its rights to adjudicate on behavioural disorders, at least insofar as it could provide the specialised knowledge upon which such decisions relied. It had extended the sphere of its influence through the actions of the probation officer. And it had simultaneously established a number of localised and specialised sites for its activities - in remand homes, in the approved schools themselves, but also, and increasingly over the 1930s, in a place separate from either but servicing both - the child guidance clinic.[76] These changes provided some of the most important conditions for a transformation in the conception of the family, the psyche, and the modes of intervention into it. They provided conditions for the formation of a psycho-social strategy which would take off after the Second World War. But it was not the psychology of the individual which was to be the agent or the beneficiary of this new strategy. This was in large part, a consequence of the way of conceptualising normality and pathology which had constituted it since the publication of Francis Galton's Hereditary Genius in 1869. It is to the ways in which psychology conceptualised the psyche, its normality and abnormality, in the 1920s and 1930s that we now turn.

NOTES TO CHAPTER EIGHT

1 Board of Education, 1914, p16.

2 Ministry of Health, 1919, p50. On the new preventive medicine, see also Haslam, 1930, Williams, 1932; and, for an American comparison, see Hill, 1916. Cf also Armstrong, 1983, Ch2.

3 For general accounts see McCleary, 1935 and Lewis, 1980.

4 See Crowley, 1910; also the articles in Laurie, 1911, especially Drummond on child and school hygiene.

5 See Pritchard, 1963 and Department of Education and Science, 1975, pp21-22.

6 See Weeks, 1981, esp pp214-220; and Bland, 1982.

7 See the account in Armstrong, 1983, Ch 2.

8 See the detailed accounts cited in n3 above.

9 Lewis, op cit, p34.

10 Board of Education, 1914, p24.

11 Newman, Child mortality in relation to the health of the State, Journal of the Royal Sanitary Institute, 30, p433, quoted by Newsholme in Local Government Board, 1910, p72.

12 Board of Education, 1914, p17.

13 Cf references cited in n3 above.

14 McCleary, op cit, p36.

15 Books on mothercraft at this time are too numerous to reference. The succesive editions of the Mothercraft Manual, first published in 1923, were important in the promotion of hygienic principles amongst the literate and well-to-do, in particular the doctrines of Truby King and the Mothercraft Training Society. See Liddiard, 1923. Correct mothercraft, of course, promoted mental as well as physical hygiene. There is a brief discussion of changes in childrearing advice and its relation to psychological conceptions of childhood in Newson and Newson, 1974. For another example, see the radio talks given in 1932 and published under the title 'A Doctor to a Mother' (Holland et al, 1933).

16 Board of Education, 1915, p25.

17 Hill, 1916, p29.

18 Macadam, 1934; see also Basnett, 1969.

19 Younghusband, 1947; see also Macadam, 1925.

20 Younghusband, op cit, pp80-81.

21 Cf Hospital Almoners Association, 1932; Macadam, 1934, p118.

22 Macadam, 1934, p118.

23 Macadam, 1925, p131. See also Owen, 1977.

24 Macadam, 1925, p21.

25 Board of Education, 1910.

26 Younghusband, 1978, p24.

27 Cf Rooff, 1972; Younghusband, 1978; Timms, 1964; Yelloly, 1980.

28 Cf Rooff, 1972, p139.

29 See the various volumes of the Charity Organisation Quarterly over this period, especially the numerous articles by Pringle, the Secretary of the COS from 1914-18 and 1925-36. This theme had been established earlier - see Mowrat, 1961, p114 ff.

30 See Deacon, 1976.

31 Ibid.

32 See Woodroofe, pp 64-73.

33 See Addison, 1977, p39; and Marwick, 1964.

34 See the discussion in texts cited in n33.

35 See Orr, 1936; M'Gonigle and Kirby, 1936.

36 Rathbone, 1924. Cf Macnicol, 1980 and Lewis, 1980.

37 Charles, 1934.

38 Cf Lewis, 1980, Ch 7.

39 Royal Commission on Lunacy and Mental Disorder, 1926, pp 16-22.

40 Board of Control, 1918; Royal Commission on Lunacy and Mental Disorder, op cit; Feversham Committee, 1939. There is a clear account of this period in Jones, 1972, Ch 9.

41 This account is drawn from the Reports issued annually by the Council. See, for example, National Council for Mental Hygiene, 1924.

42 National Council for Mental Hygiene, 1928, p32.

43 Board of Education, 1921, p109.

44 Ibid, p116.

45 Board of Education, 1928, p31. Cf Healy, 1917.

46 Board of Education, 1930, p26.

47 Board of Education, 1931, p64.

48 The best account is May, 1973, which I have drawn on extensively in the following paragraphs. See also Platt, 1969, Chapters 2 and 3 and Fox, 1952, Ch 19. A good collection of materials concerning this period, mostly English, is Sanders, 1970.

49 Civil law differed, in that it recognised the status of infancy and the problems it posed with respect to property rights, contract, enfeoffment and so forth. See Anon, 1718 and Bingham, 1816.

50 For sample judgments, see Sanders, 1970, pp10-17, 21-36.

51 Blackstone, 1765-9, vol 4, p23.

52 Russell, 1819, pp3-4, 8.

53 Loc cit.

54 Foucault, 1977; Ignatieff, 1978.

55 See Abrams, 1968, on the statistical societies and Jones and Williamson, 1979 on moral topography.

56 Neale, 1840.

57 Carpenter, 1851. See also Hill, 1857; Beames, 1850.

58 Cf our earlier discussions of the notion of 'character', especially in Chapter 3 above.

59 See Hall and Pretty, 1908, for a discussion of the Act and its relation to previous legislation.

60 Cf Holcombe, 1977; McGregor, 1957, Harrison and Mort, 1977. The campaigns which led to the Married Women's Property Acts, discussed in Holcombe, can also be seen in this light.

61 See references cited in n48, 56 and 57.

62 See Pinchbeck and Hewitt, 1973, esp Chs 12 and 13.

63 For a discussion of analogous events in France, see Donzelot, 1979, esp Ch 4.

64 Board of Education, 1920; Home Office, 1927. The exception was Borstal, first included in legislation in 1908, which was generally commended for children over 16. See Fox, 1952.

65 Home Office, 1927, p6.

66 Smith, 1922, cited in Hall, 1928, p109. Cf also Burt, 1923, 1925; Goring, 1913.

67 Hall, 1926; he is following Burt, 1923 and 1925.

68 The 'welfare' criterion had been urged by Hall, 1926 and in Home Office, 1927, eg p121. It was included in the Children and Young Persons Act, 1933, section 44.

69 Home Office, 1927, p5. Cf Home Office, 1895.

70 Hall, 1926, p64, 59.

71 Burt, 1929, p290.

72 Hall, op cit, p58.

73 Urged by Hall, 1926 in Home Office, 1927, and included in the 1933 Act in Section 35. This duty was stressed in the Home Office circular of 9.8.33 which drew attention to the Act, included in Hall and Morrison, 1933.

74 Hall, 1926, p96; Burt, 1925, appendix and 1929; Fry, 1924; Smith, 1924; Board of Education, 1920, p40; Home Office, 1924, p9; National Council for Mental Hygiene, 1924.

75 Home Office, 1927, p43.

76 See the Fifth Report of the Home Office Children's Branch, 1938.

CHAPTER NINE

THE PSYCHOLOGICAL FAMILY

The practices of investigation, diagnosis and reformation of maladjusted and delinquent children which developed in the 1920s and 1930s, entailed a new conception of the family, the type of problems which it engendered, and the nature and objectives of intervention into it. The family was a relational field, a field of dynamic interchanges between husbands and wives, mothers and fathers, parents and children, brothers and sisters. And the relations between family members did not so much concern health and habits as feelings and emotions: love and guilt, dependency and jealousy, beliefs and fantasies. A child's own family, its 'natural' family, was, in most circumstances, a uniquely appropriate emotional economy for its normal healthy emotional development - this economy was particularly difficult to replicate in an institution or elsewhere. But families did go wrong, and when they went wrong this engendered problems in the child. The way in which families went wrong was not through having bad habits or inculcating bad habits or failing to inculcate good ones. They went wrong at the level of their emotional economy. And when children showed problems of behaviour - nerves, maladjustment, delinquency - these were symptoms of this disturbance of family relationships. They were symptoms that disturbed family relations had produced a disturbed child by producing a disturbed psyche.

The psychological space had now become a kind of internal representation of the relational space of the family. Rectification hence required something different from the instruction of family members or disturbed children in correct habits and moral ways of

conduct. It was similarly no longer appropriate, except as a last resort, to remove the child from his natural family and to place him in a 'home', which lacked the very elements with which the problem was bound up - mothers, fathers, love and so forth. First the nature of the familial disturbance had to be divined from the disturbance of emotion or conduct in the child - a process of interpretation. Then the abnormal emotional relations had to be normalised - a process of therapy. The objective of intervention was to preserve the family, to get its emotional economy running along the right lines through acting on the inner feelings of family members.

A number of distinct and opposing theoretical options were possible within this general mode of conceptualising the disturbances of childhood. These combined elements in different ways, and with different consequences. This chapter describes the formation of this new framework and the theories that made it up. In the final chapter we consider the practical deployment of these theories in the Child Guidance Clinic and the new psycho-social strategy.

The disturbances of childhood

Nervous, neuropathic, neurotic, maladjusted, delinquent children - it was around these,as they emerged in the schools and in the Juvenile Courts, that the psycho-social strategy began to take shape in the inter-war years. How were these disturbances of childhood conceptualised?

As far as the medicine, psychiatry and medical psychology of the nineteenth and early twentieth centuries were concerned, mental disturbances of childhood were not a distinct object of concern.[1] Early nineteenth century texts did recognise disorders of the mind in infancy and childhood, but throughout the nineteenth century, they

were accorded a somewhat ambiguous status. On the one hand, the child had a kind of immunity from insanity, on account of its under-development, simplicity and freedom from stress. Thus Underwood argued, in 1797, that infants were in the happy state of being little affected by the passions of the mind.[2] Similarly Spurzheim, in 1817, wrote "It may be asked whether children suffer mania and insanity" and Burrows, in 1828, stated "as a general maxim insanity cannot occur before the approach of puberty."[3] Where children did suffer insanity it was of simple form. Browne argued, in 1860, that although insanity did occur in infancy it was rare, because infancy was not exposed to many of the predisposing and exciting causes which operated at other periods of life, because fewer faculties had developed and therefore fewer faculties were likely to be assaulted by disease, and because the delicacy of the infant brain made it likely that morbid changes would lead to death.[4] And Albutt, in 1892, similarly argued that one saw in children only simple and primary forms of the more complex and derivative forms of insanity in adults, and even that only infrequently. "The insanity of children cannot have a large quantity of reflection; the delusions of children cannot have much elaboration; ...the child's insanity must be an insanity of the senses, of the simpler impressions, and of the instincts, that is of the lower and more early organised centres."[5] When Maudsley discussed the question in 1879, he put it in terms of the theory of degeneracy discussed in a previous chapter. Insanity rarely occurred in savages or young children, and when it did, it took few and simple forms. This was because before one had moral degeneration one had first to be humanised and civilised - mental organisation must precede mental disorganisation and children and savages were wanting in both.[6]

It was this theme that lead to the other side of the issue of

childhood insanity. For the in utero period and that of infancy and childhood did have a significance in relation to the constitution and its destiny. The child might inherit a particular constitution from its parents which could be sound or already enfeebled. Influences at conception or during pregnancy might affect this constitution. And management during infancy and childhood could have an effect which might be permanent not only as far as the character of the adult was concerned but also on the constitution handed down to future generations. Parkinson pointed out in 1807 that infants were born with particular dispositions which might be ameliorated or exacerbated by techniques of infant management by parents or wet-nurses, especially poor feeding or excessive indulgences. Thus "Generally does the poor little sufferer pay with his life the purchase of his early indulgences; or, at best, escapes with an enfeebled constitution, presenting a constant memorial to his parents - the temper of a child is formed in infancy."[7] And when Buchan discussed the issue in 1809, he did so in terms of the familiar spiral of interaction between experiences and constitution: "Family constitutions are as capable of improvement as family estates; and the libertine who impairs the one does greater injury to his posterity than the prodigal who squanders away the other."[8]

Browne posed his discussion in 1860 almost entirely in these terms, arguing that illness in the mother, or injury while the child is in utero, can produce insanity, as can the longings, desires or habits of the pregnant mother. A tendency to epilepsy could be produced in a child whose pregnant mother was shocked by the sight of a person in an epileptic fit. A child could inherit a drunkard-like walk from the acquired habit of the mother. Further:[9]

The life-long timidity and susceptibility of James VI were

> traceable to the murder of Rizzio, in the presence of his pregnant mother. The philosopher Hobbes ascribed his acute nervous susceptibility to the fear of a foreign invasion, entertained by his mother during his utero gestation. The imbecility of a child, mentioned by Bird, was caused by the melancholia of its mother whilst pregnant.

And in general, those who had led an immoral life, " who have perpetrated self-abuse, who have given themselves up to licentiousness, lust and passion, to the vice of intemperance, to the pleasures of the table, or to any nervous excitement in excess," would not only suffer themselves, but would "entail upon their progeny numerous and grievous ills - none more numerous and grievous than psychological disorders."[10]

Maudsley represented the most extensive theoretical statement of this position, but also the beginnings of its regularisation in terms of the distinction and relation between an inherited neuropathic germ plasm and experience during the life of the organism. One had therefore to take into account the initial combination of germ elements; the influence of the mental and bodily states of one or both parents before and at the time of propagation; the influence upon the child's constitution exerted for good or ill by the mental and bodily state of the mother during gestation; and the influences brought to bear upon the child during the first year of growth and development of its susceptible nervous system. But whilst possibly as many as three out of every four cases of insanity showed an hereditary predisposition to degeneracy, hereditary insanity tended to declare itself after puberty because it was at that time that the mind became active - prior to puberty it was the physical diseases which declared their hereditary presence, because that was the time when the body was developing.[11]

As the opposition between heredity and environment firmed up in the first decade of the twentieth century, and the belief in the location of insanity in a damaged or underdeveloped nervous system and brain became dominant, this became the authoritative mode of posing the issue of the relationship between childhood and insanity. Childrens' disturbances of mind *per se* became marginal, rarely warranting a specific mention in text or index. Influences on the aetiology of mental disturbance spanned generations through heredity. This inherited tendency of the nervous system was laid down at conception and resulted in a brain insufficiently equipped with nerve cells or association fibres. After conception the nervous system might be subject to damage from direct or indirect stress. Direct stress entailed injury, toxins or lack of nutrition to the brain. In the category of indirect stress were reworked all the moral causes of insanity familiar from the earlier texts - anxiety, worry, misdirected education, financial concerns, intemperance, sexual excess, religious fanaticism and so forth - now operating on the brain through the medium of bodily processes such as impurities in the blood or exhaustion of nervous energy.[12] Whilst mental disorder could occur at any period of life, it rarely manifested itself in childhood due to the absence of such indirect stresses, but when it did so it required no special analysis. Only one issue led to childhood having any particular significance. If indirect stress could provoke the onset of actual insanity in those with an hereditary predisposition, careful management in infancy and childhood might produce a character and habits which would minimise the risk of such stress. Again here one can observe the reworking of the nostrums elaborated within moral medicine within the new conception of the nature and aetiology of insanity. Thus Cole argued

that those with such an hereditary disposition often manifested a restless and explosive nervous system in sleeplessness, excitability, night terrors and ill temper, and that careful control of diet, avoidance of stimulation, training in obedience, proper habits of thought, feeling and behaviour, self-denial, avoidance of food fads, tobacco, alcohol and religious fanaticism would have a preventive effect.

It was such a conception of the innate organic foundations ofthese childhood disturbances that led Henderson and Gillespie, in 1927, to assimilate these problems not to insanity but to mental defect. The system of classification which they utilised in the first edition of their standard Textbook of Psychiatry was based upon Adolf Meyer's conception of 'reaction types', and the text paid specific attention to childhood only within the section concerning mental defect. Here Henderson and Gillespie included a discussion of what they termed 'emotional defect':[14]

> Under this heading we include persons who have been from childhood or early youth habitually abnormal in their emotional reactions and in their general behaviour but who do not reach, except perhaps episodically, a degree of abnormality amounting to certifiable insanity and who show no demonstrable intellectual defect.

Emotional defect, they argued, was a kind of mental defect, and the emotionally unstable was one of its commonest types. This condition manifested itself in temper tantrums as a child, being bullied and unhappy at school, rapidly changing emotions and inability to sustain efforts. Emotionally defective children indulged in kleptomania, pyromania and pathological lying, grew up with poor judgment, were improvident financially and liable to alcoholism. Such children made up a considerable proportion of delinquents and moral imbeciles and,

claimed Henderson and Gillespie, since the condition was inborn, treatment held out few hopes. They did not lay much emphasis upon the utility of inculcation of correct moral habits to avoid the precipitation of disorder. Training was important, but such emotionally defective persons would often have to be placed under institutional care.

But by the time of their third edition in 1932, something appeared to have changed which had thrown into question this hereditarian and organicist pessimism and delineated the mental disturbances of childhood as a specific object of psychiatric theory and therapeutic practice. The separate chapter which they introduced on the psychiatry of childhood was announced in the preface as a consequence of "the welcome growth of Child Guidance work [which] has shown that the topic must now be considered an important part of the psychiatric domain".[15] It now appeared that many adult disorders were a cumulative result of mental habits which had been acquired and ingrained during the years of childhood and adolescence, when the plasticity of the child's mind made it so likely that the innumerable traumata of childhood would leave an indelible mark - indeed the wonder was that so many children grew to be reasonably normal adults at all. Disturbances of childhood, they now warned, should only be attributed to innate factors when all environmental and personal events had been ruled out, and all therapy had failed. The central problem was that mental growth involved a painful conflict between the natural egotism of the child and the demands of the environment. And as well as all the adult problems, childhood now had its own specific repertoire of disorders: disorders of personality (timidity, obstinacy, irritability, lack of sociability, etc); behaviour disorders (truancy, temper tantrums, lying, stealing, cruelty or food

fads); habit disorders (nail biting, thumb sucking, incontinence, stammering); 'glycopenic' disorders (migraine, insomnia, night terrors and so forth). So troubled children called for a detailed study by a skilled psychiatrist who could make a diagnosis and effect a cure principally by investigation and reformation of the environment of school and home but particularly of family relationships and the habits and manner of training the children.

But in addition to seeking to establish the rights and competence of psychiatry in this new domain, the principal theme of the chapter was, paradoxically, to argue against the necessity of a detailed examination of, or therapy with, the psyche of the child itself. Childhood problems were not, they repeatedly insisted, located in the depths of the psyche:[16]

> When signs of morbidity appear, they arise at the surface of contact, so to speak, of the child's environment with his aims and desires.

In order to understand the form of Henderson and Gillespie's argument, and the sudden concern to annexe this previously marginal problem to psychiatry, it is necessary to recognise that the disturbances of childhood had been individuated and prioritised not from <u>within</u> psychiatry but from <u>outside</u> it, and a new clinical site had been formed - the Child Guidance Clinic - where the exclusive rights of psychiatry over mental disturbances were being challenged by a non-psychiatric and therapeutic practice - one which termed itself 'the new psychology'.

Adjustment and maladjustment

It has been suggested that, in the early years of the twentieth century, a new focus of medical psychiatric and neurological debate becomes evident in the medical textbooks and professional

literature.[17] This new focus was the neuroses: types of mental disturbance which did not themselves amount to insanity, but were nonetheless severe enough to disrupt normal functioning. What is important for our purposes, however, are the places where these new problems emerged, and the manner in which they were conceptualised. Nervous fatigue, neurasthenia, 'nerves', were not discovered in the asylum, and asylum psychiatrists rarely encountered them. They owed their discovery to all those places where problems could come to notice which seemed to prevent the individual concerned from complying with prescribed tasks or social expectations, but without completely disabling them. The army, the factory, the school and the courtroom - these were the places where the subjects of this new theoretical attention emerged: the shell-shocked soldier, the fatigued or inefficient worker, the maladjusted schoolchild and the delinquent juvenile. As we shall see in a moment, the traumas of war provided the impetus for conceptualising these problems in a specific way; the problems of industry were the focus of a continuous debate. But as we have discussed in the last chapter, the school clinic, the Juvenile Court and the mental hygiene movement gave the disturbances of <u>childhood</u> a particular significance and urgency.

It appeared that children with even mild neuroses or nervous disorders might develop into insane or criminal adults, and, as a corollary, that the likelihood of insanity or delinquency might be recognised in the mild disorders of childhood. But these disturbances were not merely the the earliest manifestations of the presence of an untreatable organic condition. Whilst they would almost certainly lead to such severe troubles if left untreated, they <u>were</u> treatable. The minor troubles of childhood had became a specific object of theoretical concern and therapeutic intervention;

scarcely a text which discussed them, from whatever theoretical stance, failed to mention the significance of a correct approach to such problems from the point of view of mental hygiene.

How was the problem thus formed to be conceptualised? Psychiatry, as we have seen above, sought to retain an analysis in terms of the effects of stress upon an inherited neuropathic tendency throughout the period of the 1920s. Some paediatricians, notably Hector Cameron, did however seek to differentiate the problems of the 'nervous child' from these organic conditions, and to locate them in a psychological sphere. Cameron sought an alliance between doctors and well-to-do mothers in promoting mental hygiene by avoiding that restlessness, instability and hyper-sensitivity in children which passed insensibly into neuropathy in adult life.[18] The conduct of the nervous child, he argued, was a product of suggestion from the mother. The child loved attention and hence delighted in the distress caused, for example, by refusal to sleep, of food, or to go to school. It was thus the parent's pride, nervousness or opposition which produced the child's disturbance: "Stripped of all that is not essential we see the problem of the management of children reduced to the interplay between the adult mind and the mind of the receptive suggestible child."[19] And hence "it is through the mother, and by means of her conduct alone, that the doctor can influence the conduct of the child."[20]

This notion of suggestion was indeed to play a part in the new way of conceptualising childhood disturbances, their relations to family life, and the means of their prevention. But this was not within Cameron's two-dimensional conception of the psyche as simply a kind of register of emotional impressions. There was, rather, a much more fundamental shift in the conception of the psyche, one in which emotions, wishes and actions were linked up in a three-dimensional

space organised by flows of instinctual energy. Whilst these questions were the subject of acrimonious theoretical and therapeutic dispute in the period following the end of the First World War, the possibility of these disputes lay in the establishment of a new conceptual terrain upon which questions concerning disorders of conduct, feelings, and other troubles of the psyche would be posed. Before discussing the specific options adopted by different factions, the contours of this new terrain may be roughly sketched out.

Firstly, mild disorders of conduct and emotion, like nerves or neurasthenia, were not in themselves caused by or indicative of organic defects or damage. Individuals might inherit a constitution or a temperament which made them more prone to such disturbances, but they were not in themselves organic. They were, that is to say, acquired or 'functional'.

Secondly, these disturbances were the outcome of a dynamic interaction between the individual and his or her environment which produced a certain sort of character. Character - and this was as true for 'normal' as for 'abnormal' individuals - was no longer conceived of as a kind of passive register of the moral influences of milieu or of the determinations of brain physiology and neurology. The individual was an active agent in its formation, and the product was the consequence of the accumulation of action and experience over a lifetime. However the earliest years were the most important because at this point the individual was most malleable, and at this point certain patterns of conduct would be established which would set the terms, as it were, of actions and interactions in later life. These early interactions were in the family, and hence the family had a central role in the production of character, both normal and abnormal.

Thirdly, the activity of the individual was conceived of in a particular way. Conduct was an outcome of mental life, and of the directing of some sort of nervous or mental energy along various paths. Individuals were endowed with a certain amount of such energy which sought discharge along certain channels in order to achieve particular ends. These paths had been built into the mental equipment during the process of evolution, in order to achieve those things necessary for the survival of the individual and of the species - they made up the instincts. But in human societies, these instincts could not express themselves directly, in their primitive form. They were channelled, directed, organised into complex constellations as a result of the experiences which individuals had in their earliest years. The results of this process would normally be that the instinctive energy would discharge itself in various forms of socially useful activities. The instinctive origin of these activities, and the channels which energised them by connecting them to the primitive instincts, were not present in awareness. They were not accessible to the conscious life of the individual. They were, that is to say, unconscious. This unconscious part of the mind was precisely that. It was not an aspect of physiology or neurology - though there were undoubtedly physiological and neurological bases for these mental processes. But the unconscious was a part of mental life and could be described and analysed in terms drawn from the study of conscious mental life - wishes, feelings, phantasies and so forth - and not from brain physiology.

Fourthly, the seeking of discharge of instinctive energy in the form of action, that is to say willing or conation, was accompanied by the experience of feelings and emotions - fear, joy, disgust and so forth. And over and above these specific emotions was the overriding organisation of the instincts in terms of pleasure and

pain, and the tendency of the human organism to turn away from those actions or wishes that produced pain and towards those that were productive of pleasure. Conduct was a product of character, and the forces that constituted character were shaped and channelled by experienced pleasure and pain. But often experience was not so simple, there was conflict between different and competing impulses seeking expression, or the expression of an impulse was not possible due to social or environmental constraints. If a solution could not be found by directing the energy involved to another and more acceptable or possible activity - sublimation - then it would be found by preventing that energy from being expressed at all - repression. The repressed energy, and the ideas and feelings in relation to which it had sought expression, were pushed into unconsciousness, forming a repressed complex. Here it remained, removing a certain quantity of energy from useful purposes and generating all sorts of pathological symptoms as it sought discharge or as other feelings, wishes or emotions came into contact with it. So whilst the normal product of the experience of individuals over their early years, in the environment of their family, was adaptation or adjustment - the channelling of instincts in socially appropriate and psychically harmonious ways - things could go wrong. Repressions or inappropriate complexes could be formed, producing all sorts of problems of the emotions and the will - maladaptation or maladjustment. When one saw disorders such as hypersensitiveness, phobias, night terrors or whatever in childhood, or one came across disruptive disorders of conduct at school or truancy, one was seeing the results of such maladjustment, and the appropriate response was a form of therapy which would uncover and disperse the repressed complex, release the energy blocked and bound up, and channel it in

socially useful and productive directions.

If this was the terrain which was to a large extent accepted by all those who opposed organicist psychiatry in this period there were, nonetheless, a number of theoretical options open, which defined the lines of dispute upon it. One of these options was the brand of psychoanalysis which identified itself wholly with the theoretical and therapeutic discoveries of Freud in Vienna. Psychoanalysis came to England quite early, and proceeded under the steadfast and loyal helmsmanship of Ernest Jones. Jones founded the London Society of Psychoanalysis in 1913, and this was re-born as the British Society for Psychoanalysis in 1919. The London Psycho-Analytic Clinic, later the Institute of Psychoanalysis, was founded in 1924. The principal works of Freud were translated: Studies in Hysteria in 1909; Three Contributions to the Sexual Theory in 1910; The Interpretation of Dreams in 1913; The Psychopathology of Everyday Life in 1914 and the Introductory Lectures - under the title A General Introduction to Psychoanalysis - in 1920. A small but steady stream of people trained and practised as orthodox Freudian analysts, and a number of faithful secondary texts were produced by analysts and others who accepted the doctrines emanating from Vienna.[21] Thomas Mitchell, whose own orthodox Freudian Problems in Psychopathology was published in 1927, was editor of the British Journal of Medical Psychology from its foundation in 1921 through to 1934.

Yet the debates in its pages indicate how far Freudian psychoanalytic theory was from exclusive occupation of the new terrain of psychology. Indeed, over the twenties and thirties, classical psychoanalysis as a doctrine of the psyche and a clinical method was very much on the defensive.[22] It was vilified by small heretical factions - those promoting the doctrines of Jung and the

Zurich school from the Analytic Psychology Club and by Adlerians who founded the Medical Society of Individual Psychology in 1931. Its theoretical bases and therapeutic methods were attacked by organicist psychiatrists like Alfred Tredgold and Edward Mapother of the Maudsley Hospital, and investigated by the British Medical Association after a particular scandal in 1925.[23] A further line of theoretical and practical opposition, and one more significant for the present study, came from a group of English doctors and psychologists, many engaged in therapeutic work, who, whilst recognising the revolutionary discoveries of Freud, sought to dispense with certain of the central concepts of his system and combine the remainder with theories drawn from other domains. This school termed itself 'the new psychology'. In the face of this opposition, Freudian psychoanalysis retained its presence in the literature and the private consulting room, but largely withdrew from the public domain of social and political disputation.

The 'new psychology' however was not so modest. Its formation was contemporary with the incursion of psychoanalytic orthodoxy into Britain in the immediate pre-war period. The writings and lectures of Bernard Hart and William Brown sought to promote what were considered to be the fundamental principles discovered by Freud, whilst expressing reservations about certain of his doctrines, and effecting a judicious replacement of these elements by others more acceptable or at least less scandalous.[24] What was accepted was the energy model of the psyche, notions of unconsious mental processes and unconscious motives, repression, regression, mental conflict and complexes. What was discarded, explicitly or tacitly, was the conception that libidinal energy, or the 'sex instinct', was the organising principle of mental life and conation, together with the

associated doctrines of infantile sexuality and the sexual origins of the neuroses.

Whilst the elements of a non-organicist theory of neurotic disorders were in place prior to the First World War, it was the effects of the war itself which enabled them to be organised into a distinct and active body of argument and therapeutic techniques. An alarmingly high proportion of the casualties in the first months of war were suffering not from obvious physical injury, but from 'shell shock' - from 7-10% of officer casualties and from 3-4% of other rank casualties by December 1914. The number of such cases over the whole war was estimated at 80,000 and in 1921 some 65,000 ex-servicemen were still receiving disability pensions for 'shell shock'.[25] Treatment was mostly given near the fighting, and the majority of cases were returned to active duty within three weeks, but the more serious cases were sent to special hospitals in England - Maghull, Nettley, Craiglockhart, and Denmark Hill were the best known. Whilst many senior military officers considered 'shell shock' to be only a disguise for cowardice, to be minimised by improved morale, good officership, and, where necessary, the firing squad, organicist physicians such as Mott initially considered the condition to be a consequence of minute cerebral haemorrhages caused by the blast.

But the doctors and psychologists who were employed in these hospitals began to deploy various versions of the therapeutic techniques developed in Paris by Janet and in Vienna by Freud, and used the apparent success which they achieved as the means to dispute organicist theories of the aetiology of neuroses in general. The war neuroses provided the opportunity of extending to these 'minor disorders' of the mind the type of practice which had made clinical medicine possible, and hence of disputing the medical theories themselves. As Hadfield put it:[26]

> The cases presented by war are so simple in their aetiology and the factors which contribute to their production so well-defined and uncomplicated in character, compared with those in civilian cases, that we have the opportunity of studying them almost under laboratory conditions. Moreover, so many of these are practically identical in origin and symptoms, that they constitute excellent material for testing and compring the various methods of treatment.

But they also appeared to confirm the early doubts and scepticism concerning the emphasis on sexuality in Freudian psychoanalysis and the exclusivity claimed for the analytic method itself. The collection of papers edited by Hugh Crichton Miller demonstrate clearly the mode of conceptualisation which would come to underpin the new psychology.[27] In order to understand these neuroses it was necessary to infer the reality of processes which resembled conscious mental processes in every way except that the patient could give no account of them. These processes were the results of repression: a forgetting by the conscious mind (consciously or unconsciously effected) of some intolerable or irresolvable mental conflict. But it was not necessary to "pervert wholly the meaning of sex or sexual" or to see the origins of neuroses in some "very hypothetical sexuality of infancy" to understand these repressions.[28] These elements were replaced with a theory of multiple instincts drawn variously from William McDougall's 'hormic' psychology, William Trotter's conception of a 'herd instinct' and the concept of 'sentiments' put forward by Alexander Shand, often together with a conception of neuroses in terms of dissociation drawn from Janet.[29] Thus, for example, W H R Rivers attributed the war neuroses to a repressed conflict between the instinct of self-preservation and the

call of duty, and McDougall saw the symptoms of paralysis, muscle tremors, headaches, giddiness, lassitude, lack of confidence, insomnia and so forth as the consequence of the conflict between the repressed energies of the complex and the repressing energies of the rest of the personality which could not let this complex into consciousness.[30] And a range of therapeutic techniques were deployed - the choice depending upon the nature of the case - ranging from occupational training, through persuasion, suggestion and rational re-education to a form of psychotherapy which used hypnosis or free association to discover the nuclear incident which had been the precipitating cause of the disorder, to bring to consciousness the conflicting feelings and emotions which had accompanied it, to reveal the links between this repressed complex and the symptoms, and hence to provide relief and cure by liberating the affect and energy which had been blocked and by allowing it to be directed into other channels.[31]

In the decade following the end of the First World War, the new psychology was elaborated through reprints of Hart's book, and in books by Tansley, Rivers, Brown, Hadfield, McDougall, Hugh Crichton Miller, Gordon, MacCurdy, Raven and others.[32] Susan Brierley (who was later - as Susan Isaacs - to make a 'return to Freud' via the writings of Melanie Klein) wrote a careful and measured Introduction to Psychology in these terms.[33] What is significant for our purposes is not the degree of subtlety and sophistication with which the different authors expounded the new psychology, nor the fine details of the differences of emphasis, terminology, and the dispute which traversed it. Rather the question we must ask is this: what was it that the new psychology made thinkable? The answer is in terms of the alignment which it forged between the register of personal happiness, that of family relations, and that of social adjustment.

This was first of all evidenced in the conceptual effects of the rejection of the Freudian notion of a single libidinal energy. This was replaced by McDougall's notion of the human organism as purposive - mind governing action in the light of experience in order to direct it to certain ends. Human behaviour was driven by inherited instincts. McDougall formulated his famous definition of instinct in 1908, and in 1923 re-stated it in only slightly modified form, as:[34]

> An innate disposition which determines the organism to perceive (pay attention to) an object of a certain class and to experience in its presence a certain emotional excitement and an impulse to action which finds expression in a specific mode of behaviour in relation to that object.

McDougall himself identified twelve such primary instinctual dispositions, each of which involved <u>cognition</u> - the mind taking cognisance of the object - <u>affect</u> - the specific emotion aroused - and <u>conation</u> - the mental tendency or set towards appropriate action. These primary dispositions were flight, repulsion, curiosity, pugnacity, (associated with fear, disgust, wonder and anger), self-assertion and self-abasement (associated with positive and negative self-feelings) the sex, parental and gregarious instincts (passion, tenderness and a general heightening of pleasant feeling), feeding, construction and acquisitiveness.[35]

Not everyone accepted McDougall's views completely. Some preferred Shand's terminology, in which emotional dispositions were primary and instincts were the innate motor mechanisms through which they achieved their ends. Also significant was Shand's argument that certain of the emotions which McDougall had considered primary were in fact combinations of more than one basic emotion, and that over

the course of development action became governed by 'sentiments' which were complex organisations of different emotional dispositions that directed action in particular situations.[36] Others sought to displace McDougall's instinct of gregariousness with Trotter's more powerful 'herd instinct'. This referred to the innate disposition of the normal mind automatically to obey suggestions and influences arising from the herd or social group, and the unhappiness consequent upon being different or separate from the group.[37] Whilst these distinctions were of considerable significance in the particular explanations of pathology and normality produced, they clearly operated upon a single conceptual terrain.

For present purposes, the significance of this proliferation of instincts and the form in which they were specified is this: the impulse to social adjustment was conceived of as inscribed in the individual at the psychical level. Thus the parenting instinct and the emotional disposition of tenderness was, for Tansley, "the great psychical bond which binds the mates to one another and their children... Its biological function is to hold the family together for mutual protection - in the first instance probably the mother to her children, then the husband to his wife, the father to his children, and the wife to her husband."[38] The natural family was now a biological necessity, a social value and a realisation of wish and will. And, from its evolutionary origins in the physical safety of the group, the herd instinct bound the individual into obligations to morality and authority at the level of dispositions and in the register of pleasure versus unhappiness - though it also explained allegiances to such 'partial herds' as crowds, class, political and religious groupings.[39] Unlike the psychoanalytic postulate of a single libidinal energy with no given form of satisfaction, instinct theory construed individuals as pre-organised towards social

adjustment, for psychic energy was such that it sought discharge in directions which were advantageous both to the species in terms of social adjustment, and to the individual, in terms of the satisfaction of a wish and the experience of pleasure. And where Freud was to write, in 1930, of the unease inherent in civilisation, the new psychology was to be a science of social contentment. Personal happiness and social adjustment were now two sides of the same coin.

The second, and related, aspect of the new psychology which was significant was the notion of <u>character</u>. In these arguments, character was no longer merely an agreggate of acquired habits. Under the pressure of experience, inherited nervous temperament and innate primary dispositions were organised into sentiments, which were themselves organised into an harmonious and integrated system - character. For the new psychology, the most important experiences were those which the child gained in its home and family environment. It was here that primary instincts and emotions were channelled and connected up into constellations containing cognitive, affective and conative processes and attached to appropriate objects or ideas. The normal family provided the environment in which these impulses were smoothly and harmoniously organised and directed towards the right objects, ideas and persons, producing an harmonious and adjusted character. Parents did this through encouraging correct habits, certainly, but also through their own psychological relations with their children, through the processes of suggestion whereby the feelings and emotions of the parents towards actions and objects would be incorporated into the suggestible mind of the child. Also crucial was the operation of the child's experience upon the sentiment of self-regard. For McDougall, this was the master

sentiment of the will and that which organised and directed volition. It was made up of the paired instincts of self-assertion and self-abasement. By respecting and directing this sentiment of self-regard, socially adjusted and happy individuals would be produced, and the individual's impulse to self-realisation would be fulfilled through the formation of abiding sentiments of right habit and good conduct.[40]

A psychological rationale had been superadded to the moral rationale for the existence and promotion of the family, but simultaneously the family that was to be promoted had been limited to the natural family, for it had something which was not present in any substitutes. The natural wish of men and women was to be husbands and wives, parents and home-makers. And the natural place to raise a child was its own family, since here the wish for a child to parent and the need of a child for its parents coincided. A new type of family history had been made possible, one where the relations between the biological, the psychological, the moral and the social were not direct - as in degeneracy and eugenics - but indirect. Nonetheless, the biological and evolutionary grounding of the instincts acted as a reality-justification for the promotion of particular familial relations. The social adjustment of the individual was at one and the same time a self-realisation - since it was towards this that the biological urges were directed - and the consequence of a good psychological family.

The conception of the normal psychological family was thus formed from the perspective of pathology. The discoveries of the new psychology induced normality from an analysis of abnormality. Susan Brierley recognised this clearly, when she wrote:[41]

> The study of the abnormal has done much to reveal the inner structure of the mind, and the mechanisms by which adjustment to

> social life is effected. A disease is indeed a kind of natural experiment. When a hitch occurs in the process of adjustment of the individual to his psychical environment, its workings are revealed, - discoveries that might never be made if all went smoothly. An intimate and constant relation between normal and abnormal psychology is essential.

If the normal family was characterised in terms of an harmonious and adjusted channelling and expression of psychic energy, this was because pathology was a consequence of repression.

Repression was a consequence of an environment where dispositions were not channelled, and energy not expressed, but where it was blocked and forced into the unconscious. A family could provoke or produce conflicts in wishes and emotions, or deny them expression, or associate them with shame, guilt or other unpleasant feelings. Repression could also be produced by the parents expressing their own fears, hopes, anxieties, guilts and disappointments in relation to the child's feelings, wishes or actions. The child, who was so suggestible, would incorporate these into its psyche, and the displeasure so caused would conflict with the pressure of conation and its associated emotions and ideas. This conflict would be resolved by forcing the ideas, feelings and wishes which had provoked it into the unconscious. A similar process would occur if the parents feared the child's independence and positive self-regard, playing on its fears and anxieties in order to keep it dependent. The repressed complex would not, however, lie silent outside consciousness. The energy attached to it would find distorted expression in dreams, nervous disorders or abnormalities of conduct, in compensatory phantasies, projection of the repressed conflict onto others, anxiety and so forth. If the normal family was

construed in terms of adjustment and happiness, disturbances in the psychological relations of the family produced social maladjustment and personal unhappiness. As the new psychology began to construe the family at the level of emotions and wishes, the possibility opened up for emotions and wishes to be inscribed within the field of social regulation.[42]

One further point concerning the discrepancy between the new psychology and Freudian psychoanalysis is important at this point. It concerns the question of reality. For the new psychology, the organisation of dispositions into sentiments and character was one that was produced in the real, as a result of the actual experience by the child of its interactions with its parents, and the actual - even if unconscious - feelings, emotions and wishes that the parents had in relation to it. It was real problems of this order that were the causes of its troubles, neuroses and maladjustments. This conception had been established very early on, in work with the shell-shocked. Real childhood events had produced a conflict and been repressed. Real conflicts in the soldier's life had triggered off the trauma. Therapy proceeded by working back to these real conflicts, bringing them back into consciousness, releasing the energy that had been diverted from the repressed conflicts, and channelling it in the direction of adjustment. The reality of origins produced the possibility of a normalising therapy.[43]

The same was true in the general explanations of the functional neuroses elaborated in the new psychology. They arose from a conflict generated by the real experiences and events in family life which had been coped with by repression. The function of the neurosis was to provide a defence against the conflict and to conceal that which had been repressed. The function of therapy was to reveal to the individual his own unconscious motive and to enable him to

cope in consiousness with the conflict that had generated it. Thus on the one hand therapy could proceed by a kind of abreaction in which energy was freed as these real repressed events were reinserted into consciousness and simultaneously removed from their troubling unconscious existence, and on the other hand norms of family relations could be constructed, and types of family relations evaluated, in terms of their likelihood to promote or hinder the production of a normal, adjusted psyche. The insistence of the real provided the possibility of constructing psychological norms of healthy child-rearing and a normalising practice of intervention and therapy.

It was around this question of the real that one focus of dispute between psychoanalysis and the new psychology was organised in the late twenties and early thirties. For the new psychology, phantasy was often harmless childhood daydreaming, giving pleasure through the illusion of wishes fulfilled. But sometimes it was compensatory, the outcome of conflict, a way of escaping from an unpleasant reality. In such cases it would be dispelled by bringing the real problems into the open. But as orthodox psychoanalysis extended its techniques to the actual analysis of children, rather than inducing the psychical relations of childhood from the results of adult analysis, the priority of reality over phantasy in the mental life of the child was reversed. Hermione Hug-Hellmuth's techniques of analysis with children, dating from 1913, were reported in English in the International Journal of Psychoanalysis in 1921. Melanie Klein's extension and development of these techniques for very young children were increasingly the focus of a developing and disputatious tendency in British analytical circles. These arguments were popularised beyond the field of professional psychoanalysis by

the writings of Susan Isaacs based upon her work at the Malting House School and, from 1933, as Head of the Department of Child Development at the Institute of Education in London.[44]

The details of the disputes over the work of Klein and the issues of child analysis need not concern us here.[45] The work of Isaacs, however, was widely disseminated through the training of infant school teachers to which her department contributed, through pamphlets and through her answers to parents' questions in the journal Home and School.[46] The conclusions which Isaacs drew from theory and observation of young children entailed a denegation of the real which appeared to rule out the possibility of psychoanalysis providing general norms of conduct for parents in order to rear healthy and well adjusted children. As she wrote in 1930: "Our real behaviour [to children] and the actual conditions we create, are always for them set in the matrix of their own phantasies."[47] She accepted, like the new psychology, that the child's feelings and wishes "can only be understood in terms of the child's previous responses to his family" and that "it has become clear that this primary situation sets the fundamental pattern of his relation to the world as a whole, and all other social situations develop from it"[48]. However, whilst constantly asserting the importance of reality, she nonetheless argued:[49]

> In considering the origins of later social development in the child's relation to his parents, we have to hold in mind not only his real external relations with his parents as he knows them in the later phases of his own development, and as they are in their real behaviour, but even more, his relations to them in terms of intra-psychical conflict... His actual relation with his real parents in the second or third years onwards is largely affected by this internal situation, itself built on the

earliest and most primitive wishes and phantasies.

In blurring the line between experience and its psychical consequences, as a result of the significance accorded to primitive wishes and phantasies within the child itself, these English developments of psychoanalysis in the inter-war years years provided no easy schema for the mapping of the disorders of childhood onto real maladaptive types of family relations. Thus they problematised the project of normalising the latter in the service of the former.

If the emphasis of the new psychology was to resolve a problem in the child by action upon the family, in these developments from psychoanalysis this balance was reversed. The advice to parents and teachers provided by Susan Isaacs is a clear example of this.[50] Mothers were to be educated about the nature of the child's mind and its growth. They were not provided with a set of instructions or advice as to conduct, because the meaning of any particular situation, action or event to the child could never be specified in general, and varied according to individual circumstances and the child's mental life. Mothers could, however, be alerted to the inevitability of fears, phantasies, jealousies, angers and conflicts in the mental life of the young child. They were to recognise these as the products of the child's own beliefs and imaginings, not a product of real events or persons, but nonetheless more real to the child than any external facts. So norms of parental behaviour could not be prescribed in specific terms; only the general presumption that leaving the child free to express itself in its own way was usually preferable to constraint or direction. An understanding, liberal, tolerant attitude was to be encouraged to the vicissitudes of the mental and emotional growth of the child. The related studies of play, symbolism and phantasy in the writings of Griffiths and

Lowenfeld, with their emphasis upon the developmental functions of these relatively autonomous actions of the child's imagination, and the general privileging of the 'point of view of the child', began to dissolve the links which had welded together the elements that made up the new psychology.[51]

At the same time McDougall's hormic psychology was increasingly called into question, with each author generating his own inventory of instincts, and others beginning to question what it was that held together the various aspects of behaviour aggregated as a single instinct, apart from the fact that they were all labelled with the same name. As the thirties progressed, the conceptual alliances with psychology which had constituted the new psychology began to look increasingly shaky, and the modes of explanation which it had provided were increasingly annexed to medicine and psychiatry. It should not be forgotten that the leading figures of the new psychology were themselves not psychologists but doctors. In the post-war period, it was not psychology but a revamped psychoanalysis which would provide the new foundations for a normalising therapeutics. This would take as its central concern not so much the emotional relations between all family members, as the specific relationship between the mother and the child, or rather between the child's need to be mothered and the woman's desire to be a mother.

It is often suggested that the post-war emphasis upon the importance of the early mother-child relationship for healthy psychological developments was an ideological legitimation for the closure of war-time nursery provision, the removal of women from the labour market and their re-domestication. But the arguments concerning the damaging effects of separation of babies and young children from their mothers ante-date the famous post-war studies of children reared in institutions, and the requirements of post-war

economics. [52] The work of Bowlby, Winnicott and the other celebrants of maternality had its foundation in that which the new psychology had made possible. Before the war, Bowlby and Winnicott both cut their teeth in the child guidance movement, and maintained many of its normalising aspirations, founded now upon an emphasis upon the specific importance of the child's first object relations in the formation of the ego. For example, Bowlby's famous study of 'Forty-Four Juvenile Thieves' which claimed to establish the link between early separation from the mother, an Affectionless Character, and juvenile theft, though not published until 1944, was carried out at the London Child Guidance Clinic during the years 1936-1939.[53] The Child Guidance Clinic was the site which made this new theory and practice of the genesis of childhood disturbances possible.

The young delinquent

If the new psychology was to lead to a clinical role for psychological knowledge from the direction of the minor mental disturbances of childhood and the perspective of mental hygiene, it was to intersect with another path which also prioritised the establishment of the psychological clinic. The issue for this second line of development was not so much the maladjusted child who would present worse problems in the future but the delinquent child and the past origins of his conduct. We saw, in the last chapter, the way in which this problem was formed in the debates around the juvenile court and in the texts of Charles Goring and Maurice Hamblin Smith. But the leading advocate of this tendency, and promotor of the role of individual psychology, was, once again, Cyril Burt.

In the decade following the passage of the Mental Deficiency Act 1913, there was a consistent attempt to extend the hereditarian

explanations concerning idiocy and feeble-mindedness to the problems of delinquency and crime, through the notion of 'moral imbecility'.[54] Many psychiatrists, notably Mercier, Tredgold and East, sought to uphold the argument that there was indeed a class of defectives who suffered from an inherited or congenital defect in their moral faculty - without necessarily an accompanying defect of intelligence - which was manifested by aberrant conduct in childhood leading to delinquency and criminality, and that these children should be dealt with in the same way as other defectives, for the condition made them unreformable.[55]

It is paradoxical at first sight that Burt, architect of psycho-eugenics, should have been at the forefront of the opposition to this application of the familiar strategy to a new domain. Especially since he had himself, in 1917, described a class of unstable persons who were a definite type of mental defective - defective in character rather than in intellect.[56] But this opposition is intelligible on at least two counts. Firstly, as an attempt to claim the disturbances of childhood and their relation to delinquency as a field of psychological rather than medical expertise. And secondly, in that these conditions were to be attributed to factors other than heredity, to allow psychology a space of action beyond that of mere ascertainment of an inborn state of affairs - to allow it, that is to say, a role in therapy and reformation.

Burt took as his targets two notions which he reckoned to underpin the 'medical' view - the notion of an inbuilt 'moral faculty' and the argument that crime ran in families.[57] There was no inborn condition of 'moral blindness', he argued, but rather an inherited temperament which was shaped and channelled through family life. And family histories, he claimed, showed that the proportion

of delinquents with a family history of transgression of moral rules was low, and in any event delinquency was more likely to be transmitted by family life than by inheritence. At the most, what was inherited was a general weakness of constitution but whilst such "weaknesses, when excessive, may favour a moral lapse in later life; they in no way constitute a fatal and inexorable propulsion to it."[58]

In his own analyses, Burt began to lay out a way of conceptualising delinquency and its origins which would lead to a new proposal for a clinical status for psychology. This was based upon an energy theory of the psyche which had been around since Galton, but which, under the impetus of the debates discussed in the last section, was now reworked into a general theory of conduct.[59] Burt, like others,indeed argued for the importance of early recognition of instability during school age in order to reduce the numbers who would have to be dealt with later in the hospital, the asylum and the jail. But early identification was not in the service of permanent segregation but for the initiation of reformatory measures.[60] The problems that the unstable might produce were a consequence of their high level of "general emotionality" - analagous to "general intelligence". But whether this led to delinquency or to brilliance and/or or originality depended not upon the excessive level of emotionality itself, but the way it was channelled. Properly directed, it could lead to the following of a highly useful and productive life, ill-directed, to perversion, morbidity, impulsivity and criminality. The problem, that is to say, was neither physical nor inborn - it was a psychological problem, with psychological causes, that admitted of psychological solutions. It frequently arose from conflicts and inconsistent discipline in the home, in which the congenital temperament was malformed by the emotions of the

family. As Burt put it:[61]

> The natural temperament of the congenitally unstable provides the most fertile soil in which the seeds of crime or immorality take root. The child delinquent suffers from no ineradicable criminal instinct and from no irremediable deprivation of the moral sense. He suffers merely from misdirected energy.

If the family was not channelling energy correctly then the child was better off being removed from it and located in a colony, conceived of along the lines of a new form of moral treatment. The unstable child was to be placed in a free-running, self-disciplining community, along the lines of Homer Lane's Little Commonwealth or the Riverside Villages. Here, free from interaction with an unstable mother, without arbitrary discipline and repression which blocked energy rather than channelling it along useful lines, immersed in country life with its uniformity and orderly progression of sensuous, natural and impersonal interests, the child could truly be reformed:[62]

> In the worst delinquent there is always a better self... if the teacher is freed from the task of unpleasant dispenser of arbitrary punishment he can readily make himself the confidant of each individual child and become, where necessary, like the sympathetic psychoanalyst, a sort of sympathetic father confessor.

A number of things have happened here that appear to place Burt's arguments on the terrain discussed in the last section. Firstly, delinquency and immorality have begun to be conceived of in terms of the interaction between some dynamic aspect of the child - energy - and its environment. Secondly, what the child turns out to be is the result of the accumulation of these interactions - a

conception of development. Thirdly, these events are conceived of as happening in a psychological domain, and what characterises this domain is not a matter of intellect but of emotion. Fourthly, what structures emotional development are interactions, emotional interchanges between family members - the family has thus a crucial role in the genesis of instability and delinquency. Fifthly, in that these are problems arising in a psychological domain, psychologists rather than doctors are the appropriate diagnostic agents. Sixthly, whilst doctors conceive of the problems as intractable to reform, psychology can both explain their genesis in the life of the individual and prescribe a therapeutic regime.

This was the position that Burt put forward too in a lecture to the Charity Organisation Society.[63] The Society had asked Burt to address the question of whether social workers could improve their efforts by a study of psychology. Burt answered in the negative, if this meant the study of the standard textbooks of psychology and related laboratory demonstrations and exercises. The majority of such textbooks were engrossed with the processes of sensation; the remainder dealt with the general principles of perception, memory and association. These had about as much value to the social worker handling concrete cases as a knowledge of plant cells had to the gardener bedding out begonias. But the psychology of individual differences was another matter. Here psychology and social work were united in their concern with the nature of mental differences in different individuals, the signs by which they might be recognised, the causes which produce and remove them. So it was individual psychology which was to be "the master science" for all those who dealt with individuals and had to take decisions in the light of their character and personality.[64]

The Young Delinquent, first published in 1925 and going through

four editions in the following twenty years, at one level merely systematised these arguments and sought to substantiate them by reporting the results of a study of some 200 young delinquents and a matched group of 400 non-delinquents. It appeared to align individual psychology with the new psychology and with the types of analysis and practice which it suggested. But at another level, in wishing to incorporate these within the theory, methods and expertise of individual psychology, it attempted to recast the new psychology in terms of the variation of emotional characteristics across a population, and hence make it amenable to the statistical techniques, scalings and assessment methods which had come to define, at the most fundamental level, what could count as a scientific psychology of the individual. At this level, the seeds were sown of the failure of individual psychology to establish itself as the dominant instance in the Child Guidance Clinic. Let us first follow the account of delinquency which Burt produced.

The delinquent act was a symptom, and only an extreme symptom, of ordinary childhood naughtiness. Its causes were fundamentally mental. Hence the object of investigation - if these causes were to be discovered - and treatment - if they were to be removed - was the inner mental life of the delinquent. Certainly physical conditions or defects might be involved, but since criminal activity sprang ultimately from the mind, these could operate only through the moral or emotional reactions which they produced and which might persist, even after the physical condition had been cured.[65] For crime was a product of the inner mental life of the criminal. This mental life or mental state was not <u>determined</u> by heredity, although heredity could produce an individual in which delinquency was more or less likely to occur. And the inner life of the individual which was

significant in relation to delinquency was not principally that of the intellect. Only a small proportion of delinquents were defective in intelligence; others were of dull, normal or even above-normal intelligence; intellectual factors were usually accessory rather than the main causes of delinquency. They did not furnish the motive for the act; they simply removed some of the checks, based on prudent or rational insight, which prevented the normal mind from giving way to desires whose fundamental source was an inner instinct or impulse. The same was true of environmental factors. Although such factors were crucial in many cases, they could not operate on conduct directly, but only through the mediation of the mind. Poverty, for example, which had so often been considered a cause of crime could not be so in any simple sense, for whilst the majority of delinquents might be poor, the majority of the poor were not delinquent. It operated therefore, not as an absolute cause but a relative one, it was a matter of: "the ratio of available means to irresistible desires."[66]

It is true that in his discussion of environmental factors, Burt was reworking themes familiar from earlier discussions of delinquency and its moral causes in the defective habits formed in the home and the community. But the transformation effected was through the linking of these into a new conception of the moral domain, no longer as constituted by learning through association of ideas and a calculus of pleasure and pains, but a complex, three dimensional realm with its own laws and processes very different from those of consciousness, rationality and the intellect. Environmental factors could be divided into those outside the home and those inside the home. The former - the bad influence of friends and associates, unemployment, uncongenial school work, misuse of leisure time - could give the opportunity for, or actively promote, the development of bad

habits; delinquency caused by such conditions was best dealt with by the constructive guidance associated with probation. But of more importance were factors within family life: 'defective family relationships' such as step-mothers or fathers, illegitimacy or whatever; 'vicious homes' where one or both parents was a criminal or promiscuous; but most usually 'defective discipline' where the parents were too strict, too lax or too inconsistent.

But whilst at one level the role and nature of the environmental conditions were utterly familiar, as was the language in which they were described, at another level the mode of their action was radically transformed. Unstable and delinquent children had prioritised a new domain for psychological conceptualisation - that of temperament and character, now construed in terms of instincts and emotions. For environment, like physical conditions or intellect, produced disorders of conduct through the consequences which it had for temperament or character: "the sum total of all those personal qualities of mind which do not constitute, or are not pervaded by, intelligence".[67] Like the 'new psychology' which it so evidently drew upon, this mode of conceptualisation acted as a framework within which the demands of social existence could be linked up with the biological and psychological laws of development of the psyche, providing an extra-social legitimation for the categories of adjustment and maladjustment, and the means by which 'the normal family' could be construed in times of prescribed norms of psychological relationships between husbands and wives or parents and children.

Burt allowed that there were cases in which children were 'emotionally defective' in the sense in which Henderson and Gillespie used the term. But such cases were rare; in most cases delinquents

were either temperamentally normal or else temperamentally unstable. Instability however was neither the cause of delinquency nor irremediable, nor a justification for permanent segregation. We can see here how Burt operated on the same terrain as the new psychology. What was inborn was a set of biological instincts, and a level of energy which 'fuelled' them. In some cases specific instincts might be overdeveloped, producing particular types of misconduct: an overdeveloped sex instinct was linked to promiscuity; anger to violent offences; acquisitiveness to theft and so forth. But more often what was involved was a generally high level of energy which sought discharge through all the instinctual channels. Problems arose when this energy was misdirected through the family producing anti-social habits or when it was merely blocked instead of being 'sublimated' - directed in a socially useful way - when it would find itself substitute channels in order to discharge.

'Environment' thus is reconceived as all those influences which might act upon the expression of the instincts. It might allow the instincts to discharge themselves in a direct and unchannelled way, suitable for the primitive times in which they became part of our hereditary endowment, but not for a life in civilisation. It might channel the energy in the wrong way, through not building up correct habits to organise it into socially useful 'sentiments' or through organising it into anti-social 'sentiments'. In such cases, treatment was most effectively carried out by removal from the home environment, into one where the old habits by which the impulses were directed could be broken down, and new and constructive ones formed.[68]

But also, events might cause the repression of energy and the formation of unconscious 'complexes'. This was related not so much to actual home conditions as to the peculiar mental life of the

child: foolish phantasies stemming from doubts about the love felt by parents or rivalries with siblings; conflicts between pairs of opposing instincts such as gluttony and fear around the purloining of food; conflicts between sexual temptations and social taboos. Here something unpleasant is blotted from consciousness, and that which has been repressed may return through other channels of discharge - stealing, violence, running away - in which the substitute act is linked to the original temptation through a connection unknown to the delinquent. Burt claimed that he had found traces of such repressed complexes in 57% of his cases - most often where intelligent persons with no obvious reasons or motives of gain had taken to a life of crime. Here, none of the usual methods of treatment were appropriate; what was needed was "psychoanalysis":[69]

> The object of psychoanalysis is to loosen the twisted knots in which the soul is entangled. The analyst must strive to disengage all the implicated motives of the child, unconscious as well as conscious, so that both the child and himself may become fully aware what hidden bonds encumber him.

Burt shared the conception of psychoanalysis as a method of investigation of the real events, feelings and conflicts which had been repressed in the formation of character and as a process of rational reconstruction of motives and of re-education to bring that which was unconscious under conscious control.[70] Psychoanalysis was a kind of practical re-education of the psyche to free repressed energy and to rechannel it along socially acceptable and constructive paths.

At the very beginning of The Young Delinquent, Burt had staked the claims of psychology, rather than medicine, for jurisdiction over the

behavioural disorders of childhood, on account of their mental origin. He wrote:[71]

> And there is now a definite body of ascertained knowledge, tracing mental symptoms to their causes, just as medical knowledge tracks down the sources of bodily disorders, and so can prescribe for each its proper treatment or appropriate cure. The study of the criminal thus becomes a distinct department of this new science - a branch of individual psychology; and the handling of the juvenile offender is, or should be, a practical application of psychological principles.

And a vital sub-plot of The Young Delinquent was to demonstrate the variety of the factors that could produce delinquency, and the need for, and efficacy of, psychological analysis, investigation and conceptualistion if one was to understand the complex workings of these factors in the mental life of the child. It thus led naturally to a reactivation of the demand for a site of operation for this psychological expertise, not now in relation to the defective, but to the disturbed and the delinquent. Burt put it thus:[72]

> The delinquent himself must be approached individually, as a unique human being, with a peculiar constitution, peculiar difficulties, and peculiar problems of his own. The key-note of modern educational thought is individuality... if this is needed for the normal, how much greater must be the need among the abnormal, the neglected, the delinquent!... Whatever authority has to grapple with such cases must at all times regard not the offence but the offender. The aim must be not punishment, but treatment; and the target not isolated actions, but their causes. Since the causes seldom float conspicuously upon the surface, such authorities must have access to all available information, and possess means to make for every case intensive

> investigations of their own. On each main aspect they must have expert help. A social investigator must report upon home circumstances; a medical officer must inspect the child for physical defects; a psychologist must be at hand to apply mental tests, to assess temperamental qualities and to analyse unconscious motives. A psychological clinic embodying all these different workers studying the same case scientifically, side by side, is the most pressing need of all.

The psychological clinic, for which Burt provided a detailed model in an appendix, was intended to install individual psychology as the integrating instance in a complex of investigation, adjudication and treatment which spanned home, school and court, social work, medicine and probation, with options ranging from permanent segregation, temporary committal to a reformatory colony, probationary supervision in the home, and psychoanalysis. If these aspirations of individual psychology were not to be realised, it was nonetheless the case that such sites were established, and provided the means by which a form of psychological knowledge would underpin a new strategy of regulation of children and families. In the final chapter of this study, we examine the development of the Child Guidance Clinic and the practices associated with it, before considering why the psychology of the individual achieved such a limited place within it.

NOTES TO CHAPTER NINE

1 For a good account of the early medical literature, see Garrison and Apt, 1965.

2 Underwood, 1797, Vol 3, p152.

3 Spurzheim, 1817, p106; Burrows, 1828, p244; quoted in Browne, 1860, p286.

4 Browne, loc cit. cf also West, 1854, p189. West introduced a separate lecture on disorders of the mind in childhood in the 3rd edition of his book, apologising for its fragmentary nature due to the lack of access of medical men to information on this type of affliction of early life. He pointed to the similarity between disorders of the mind in childhood and moral insanity - a theme which will be taken up later.

5 Albutt, 1892.

6 Maudsley, 1879, Ch 5.

7 Parkinson, 1807, quoted in Hunter and Macalpine, 1963, p617.

8 Buchan, 1807, pp 8-9.

9 Browne, 1860, p293.

10 Ibid, pp 289-290.

11 Maudsley, 1879, Ch 3. cf Clouston, 1892. This mode of conceptualisation is discussed in detail in Chapter Four above.

12 Craig, 1905; Cole, 1913. Bruce, 1906, has a similar position, but stressed the role of diet and nutrition leading to the manifestation of hereditory dispositions.

13 Cole, 1913, p287.

14 Henderson and Gillespie, 1927, p371.

15 Henderson and Gillespie, 1932, pvii.

16 Ibid, p488.

17 Armstrong, 1983, pp 19-31.

18 Cameron, 1919.

19 Ibid, p31.

20 Ibid, p11.

21 For example Jones' influential Papers on Psychoanalysis, first published in 1912; Pfister's Psychoanalytic Method, 1917; Low's Introduction to Psychoanalysis, 1920. Jones' own reflections on the history of psychoanalysis in Britain are contained in his Free Associations, 1959, and in Jones, 1945 and 1957, Vol 3.

22 It was, however, influential in other areas. For a discussion of the influence of psychoanalytic theories of family, kinship and sexuality on marxism and anthropology, see Coward, 1983, Chs 6 and 8.

23 The BMA eventually reported favourably and recognised psychoanalysis as an authorised medical speciality. cf Yelloly, 1980, p35.

24 Hart, 1912; Brown, 1913 discussed in Yelloly, 1980, p29. William Brown also wrote some standard texts on mental measurement. See Brown, 1911, Brown and Thompson, 1921, and the discussion in Chapter 7 above.

25 Hearnshaw, 1964, pp 245-246, has a concise account of the debate. See War Office, 1922 and Mott, 1919.

26 In Miller, ed, 1920, p62.

27 Miller, ed, 1920. Among the contributors were H Crichton Miller, J A Hadfield, W H R Rivers, M Culpin and W McDougall. Brown also worked with shell-shocked soldiers, as Medical Officer in Charge of the Craiglockhart War Hospital for Neurasthenic Officers.

28 The language is McDougall's, in ibid.

29 McDougall, 1908; Trotter, 1916; Shand, 1914. Janet's conception was especially promoted in the work of Hart, 1912, and Brown - for example his Psychology and Psychotherapy, 1921.

30 Rivers in Miller, ed, op cit, and also in Rivers, 1920; McDougall in Miller, ed, op cit.

31 See especially the papers by Hadfield, Culpin and McDougall in Miller, op cit.

32 Hart, 1912; Tansley, 1920; Hadfield, 1923; McDougall, 1926; Miller, 1921, 1922; Gordon, 1926; MacCurdy, 1923; Raven, 1929. McDougall was the most outspoken protagonist in the opposition of the new psychology to psychoanalysis. See especially his 1926 and 1936.

33 Brierley, 1921.

34 McDougall, 1923, p110.

35 McDougall, 1908.

36 Shand, 1914.

37 Trotter, 1916.

38 Tansley, 1920, p242. cf also Miller, 1921, 1922.

39 Cf Tansley, op cit, Chapters 19 and 20 and Miller, 1922, Chapters 9 and 10.

40 Cf Hadfield, 1923, Chapters 2 and 3.

41 Brierley, 1921, p40.

42 It should be pointed out that there were texts which attempted to span the gap between orthodox psychoanalysis and the new psychology, by introducing heretical elements into psychoanalysis without recognising any conceptual incompatability. Flugel's Psychoanalytic Study of the Family, 1921 was the most important of these. It was the third volume published in the orthodox International Library of Psychoanalysis, and contained acknowledgments to both Jones and Burt, and favourable references to Hart, Trotter, Shand and McDougall. From the arguments so produced, Flugel derived numerous maxims concerning appropriate parental conduct, together with analyses of the psychical origins of criminality, delinquency and social unrest as a consequence of early familial relations. Orthodox analysts kept a friendly distance from Flugel, but his book sold steadily in Britain year after year and was one of the financial successes of the Hogarth Press, which disseminated orthodox Freudian thought in Britain. (cf Coward, 1983, pp235-236).

43 eg Brown, 1921, Ch 1.

44 Hug-Hellmuth, 1921; Klein, 1923, 1927, 1932; Isaacs, 1928, 1930, 1933.

45 Whilst some analysts objected to the whole principle of child analysis, Klein was initially supported by Jones and others. The initial disputation was with Anna Freud, who had started her own work with older children in Vienna in the early 20s. Anna Freud's work on child analysis was published in America in 1928, but in England not until 1946. Nonetheless the lines of dispute were laid out in a Symposium on Child Analysis held in London in 1927. Klein disputed Anna Freud's contention that the child could not form a transference neurosis and that child analysis should be educational, seeking to strengthen a feeble super-ego. She also disagreed with Anna Freud's views that valuable work with children could only be done in the positive transference, and that the interpretation of symbolic meaning of children's play in the 'play technique' was of dubious validity. For present purposes, these disputes achieved significance only after the Second World War, when Anna Freud's ego psychology took hold in England and became influential both in therapeutic practice and in more general conceptions of the role of early mother-child relations in later disturbances. The Ego and Mechanisms of Defence was published in translation in England in 1937. A second axis of dispute, involving Klein and Edward Glover in particular, concerned the competence of lay analysts to discuss psychosis.

46 Eg Isaacs, 1935 ed, 1937.

47 Isaacs, 1930, p8.

48 Isaacs, 1933, p385.

49 Ibid, p386.

50 See the much reprinted The Nursery Years, 1929, thepamphlets citèd above n 46, and the chapter on 'Problems and crises in early development', in 1933.

51 Griffiths, 1935; Lowenfeld, 1935.

52 The problems with this 'folk myth' are well discussed in Riley, 1979.

53 Bowlby, 1944. See also Bowlby, 1940 and the discussion in Riley, op cit. For the development of Winnicott's work, see his papers collected in Through Pediatrics to Psychoanalysis, 1975.

54 As Burt points out, in his criticism of the oncepts of moral insanity and moral imbecility in The Young Delinquent, 1925, p36, the term 'moral insanity' was first used by Pritchard in 1835, and especially developed in Maudsley's work - see Maudsley, 1868. For the categories of mental defect in the 1913 Act, see the discussion in Chapter 6 above.

55 Mercier, 1917; Tredgold, 1917; East, 1923. See also the other contributors to the Symposium held jointly by the Educational and Medical Sections of the British Psychology Society, and published in the British Journal of Medical Psychology - Shrubsall, 1923; Stoddart, 1923; and Burt, 1923. See for the 'medical' view, Maudsley, 1872, pp 31-65 and Tredgold, 1914, p326. The issue is discussed extensively in Burt, 1925, p34 ff.

56 Burt, 1917.

57 Burt, 1923 and, for the most extended discussion, Burt, 1925, Ch 2.

58 Burt, 1925, p58.

59 Burt also cited McDougall and Shand to legitimate his argument.

60 Burt, 1917.

61 Ibid, p69.

62 Ibid, p77.

63 Burt, 1918; Sybil Clement Brown, pioneer of psychiatric social work in England, was fond of referring to this lecture - cf Brown, 1939a, 1939b.

64 Burt, 1918, p5.

65 Ibid, p267.

66 Ibid, p92.

67 Ibid, pp 399-400.

68 Ibid, pp 420-537. On reformation see especially p515 ff.

69 Ibid, p570.

70 Cf above. The principal sources on psychoanalysis that Burt refers to are Flugel's The Psycho-analytic Study of the Family (1921), Pfister's Psychoanalytic Method (1917), Hug-Hellmuth's article on child analysis, 1921, and Melanie Klein's article 'The role of the school in the libidinal development of the child (1924), as well as Freud's Introductory Lectures on Psychoanalysis (1922) and Jones Papers on Psychoanalysis (1923).

71 Burt, op cit, pp 4-5.

72 Ibid, pp 610-611. Burt had first put forward his scheme in a Report to the London County Council on the future organisation of the Psychological Service for Schools.

CHAPTER TEN

PSYCHOLOGY AND THE CLINIC

The Child Guidance Clinic formed at the intersection of a number of different axes. The mental hygiene movement, the Juvenile Court, the new psychology, and the psychology of delinquency all proposed the establishment of such sites for early assessment and/or treatment. The Child Guidance Clinics which were founded in the 1920s and 1930s were formed in the image of the new psychology. This psychology entered into an alliance with welfare workers, providing the rationale for a new theory and practice of social work. The psycho-social strategy which took shape entailed a way of conceptualising the family, pathology, and the objectives and techniques of reformation which was very different from that involved in welfare work within neo-hygienism.

But individual psychology, whose trajectory we have traced in previous chapters, was neither the master science of this strategy nor the dominant instance in the clinical site which it had promoted for so long. With a few exceptions, the role of psychologists, professionally and practically, was subsidiary and limited. It was confined to the mundane activities of mental testing, supplying its results to others for action in both diagnosis and treatment. Psychometrics, not psychotherapy, was the destiny of the psychology of the individual.

This final chapter describes the emergence of the psycho-social strategy and the formation of a clinical site for its operations. And it considers the reasons for the marginalisation of individual psychology, the relative failure of its claims for conceptual, therapeutic and professional dominance in respect of children's

disturbances of emotions, wishes and conduct.

The psychology of the clinic

The aspirations of psycho-eugenics to a clinical role have already been documented. Whilst these ambitions were largely thwarted, at least one local authority had set up a 'psychiatric clinic' by 1913, equipped with the paraphernalia of anthropometrics, and with the role of identifying feeble-minded schoolchildren.[1] But the move to a psychology of the clinic really began not in relation to problems of the intellect, but problems of nerves. Hospital children's departments began to concern themselves with 'nervous' children soon after the First World War. Hector Cameron's The Nervous Child, discussed earlier, was based upon the problems he had encountered as a paediatrician in charge of the Children's Department at Guy's Hospital, London.[2] However by the early 1920s, a number of separate and specialised clinics had been established for the treatment of children and adults with what were now being termed 'functional nerve disorders'.

It appears that the first of these was the Medico-Psychological Clinic of London, which opened in 1913.[3] It was run by Jessie Murray, a doctor who had attended Janet's lectures in Paris. The publicity material for the clinic used neo-hygienist language, describing it as 'a fresh adventure in the field of Preventive Medicine, viz., in Mental Hygiene'. It argued that attempts to discover and treat the earlier manifestations of disorders of the brain and nervous system were of far-reaching significance, as these disorders were present in a large proportion of those in prisons, reformatories and workhouses as well as those who were recognised as insane. And it claimed that modern research had demonstrated the

efficacy of new therapeutic measures if they were applied at an early stage. Principal amongst these measures was psychoanalysis, and apparently it was disputes over the exclusivity of its adherence to orthodox Freudian analysis, and its affiliation to the British Society of Psychoanalysis, that led to the demise of the Clinic in 1922. James Glover, its director at the time, went on to become an orthodox Freudian analyst; a number of those who had worked and trained at the Clinic, however, transferred their allegiance to the Tavistock Clinic.

The Tavistock Square Clinic for the Treatment of Functional Nerve Cases was established in 1920 by Hugh Crichton Miller "pioneer of the new psychology".[4] It was the new psychology which provided its practical, theoretical and therapeutic orientation, and the link which it established between the psychical, the familial and the social was instantiated in the way in which the Tavistock combined diagnosis and therapy in the clinic itself with the investigation of family relations in the home. Nowhere was this clearer than in its work with children. Children were treated from very early on, and in 1926 the Children's Department was opened under Dr W A Potts. This was an affair involving many disciplines. Initially, a doctor would examine and interview the children, and a voluntary social worker would investigate home and family conditions. For this latter task the Tavistock had the full-time services of Doris Robinson, who was amongst the first batch of British social workers to be sent out to America for training as a Psychiatric Social Worker. The Clinic utilised psychologists, but they were not involved in diagnosis or therapy, which was strictly a medical matter. Their role was the carrying out of psychological tests, and the ascertainment of intelligence quotients, the result of which would be fed into the diagnostic process. In 1928 a psychologist, Constance Simmins, was

appointed to the staff, to be joined by other psychological assistants in the 1930s, but the role and function of psychology in the Tavistock team changed little.

Children came to the Clinic from a number of sources - 'nervous' children from middle class families unable to afford high private fees; maladjusted children having trouble at school; children referred from the juvenile courts. In relation to the juvenile courts, the Tavistock struck up a very intimate relationship with the probation service. It worked closely with the Shoreditch Court, and held frequent meetings and training courses in which the doctrines of the new psychology were disseminated to the attending probation officers. In the late twenties and early thirties Probation, the journal of the National Association of Probation Officers, became virtually a Tavistock house-journal, with contributions from Crichton Miller, Hadfield, C L Burns (physician to the Children's Department) and others, on topics such as 'The Unconscious Motive of the Juvenile Delinquent.' Whilst, to the disappointment of its founder, the Tavistock Clinic itself remained unique, and failed in its hope to provide the model for similar institutions throughout the country, the same was not true of the Children's Department. Its work increased and it established links with the psychologically minded inspectorate of the London County Council - people like C W Kimmins, whose psychological education was through Sully's textbooks and the psychological laboratory of University College.[5] It gave evidence to the Home Office Committee on Persistent Offenders and, as a consequence, was asked to supply regular advisory attendants at children's courts.[6] And the pattern which it established was generalised through the emergence of Child Guidance Clinics. It is to these that we now turn.

Like the Medico-Psychological Clinic of London, the Tavistock promoted itself in the language of mental hygiene. This is clear in the popular books written by Crichton Miller, and in the participation of the Tavistock in various special events.[7] For example, in 1929, the Tavistock collaborated in a 'Joint Committee of the National Council for Mental Hygiene and the Tavistock Square Clinic' in organising a conference on mental hygiene held at Central Hall, Westminster, and covering sex eduction, the 'personal equation' in industry, public health work and mental health, the workings of the juvenile courts and problems of delinquency.[8] For the mental hygiene movement, the Child Guidance Clinic was both the foremost of the measures for early and preventative treatment, and the one which was most effectively realised. An appendix in the Annual Report of the National Council for Mental Hygiene for 1927/8 welcomed the plans by the Child Guidance Council to establish a demonstration clinic which would show its potential as the centre of a system of child welfare embracing "the nursery, the home, the school, the playground and the courts".[9] The history of the child guidance movement in England is well documented.[10] The different accounts make varied claims as to priority amongst the various groups and individuals involved, usually in the service of the author's attempt to validate the claims of one or other profession to control over the child guidance service. These rival claims need not concern us here. What is more important is the way in which the child guidance movement acted to integrate a range of diverse concerns and orientations into a coherent framework of argument and practice.

The Child Guidance Council was set up in 1927, through the collaboration of a number of organisations and individuals. Amongst those involved were Burt, who was Chairman of the Executive Committee and who, as we have seen, had long been an advocate of psychologial

clinics. Dame Evelyn Fox was the Honorary Secretary, representing the involvement of the old National Association for the Care of the Feeble-Minded, now retitled the Central Association for Mental Welfare. The National Council for Mental Hygiene represented the more general social aspirations of the child guidance movement. The links with social work were formalised with the involvement of the Institute of Hospital Almoners and the Charity Organisation Society. And the concern with delinquency was manifest in the participation of the Howard League, which had published articles in 1924 urging the setting up of psychological 'laboratories' for the assessment of young offenders.[11]

In fact it was this question of delinquency which had provided the impetus which the movement needed to get itself off the ground. The chronological histories pay much attention to the visit that a magistrate, Mrs St Loe Strachey, paid to the United States of America in 1925 and the impression that was made upon her by the child guidance work with young offenders which she saw.[12] The American pattern, in which a team of psychiatrists, psychologists and social workers carried out medical, psychiatric, psychological and social investigations of individual children had been established by William Healy in 1909 when he set up the Chicago Juvenile Psychopathic Institute.[13] It received widespread publicity with the publication of The Individual Delinquent in 1915.[14] The model was copied by the Boston Psychopathic Hospital, which actually appointed social workers to its staff - Healy had made use of other social agencies - and which invented the designation 'psychiatric social worker' in 1915. A private benefaction - the Commonwealth Fund - collaborated with the American National Council for Mental Hygiene to set up the first American Demonstration Clinic in 1922 - its aim was "to develop the

psychiatric study of difficult pre-delinquent and delinquent children in schools and juvenile courts, and to develop sound methods of treatment based on such study."[15]

The first English Child Guidance Clinic to open was explicitly modelled on the American pattern. This was the East London Child Guidance Clinic opened by the Jewish Health Organisation in 1927, under Dr Noel Burke and Dr Emanuel Miller.[16] And a year later, in 1928, Margaret Lowenfeld founded the Children's Clinic in West London, which renamed itself the Institute of Child Psychology in 1931. It was supported by fees, voluntary donations and subscriptions, and received children from all over London sent by schools, care committees, doctors and societies concerned with the welfare of children. The Institute set itself apart from other organisations, and felt that its orientation was unique. It argued that it was because of some unsuccessful direction of emotion in the child itself that environmental influences produced neuroses, social and emotional maladaptation, delinquency and criminal tendencies, as well as chronic physical ill-health. Lowenfeld's orientation, which we have discussed in the last chapter, caused her to consider that the treatment should be of the child itself, and was inevitably a lengthy business, and that it should consist of a 'scientific adaptation of free play'. This was carried out in the playroom of the Institute, where the child would use specially constructed or adapted materials to give expression to his conscious and unconscious phantasies and where his primitive impulses would be re-directed under the supervision of the Psychological Director.[17] The Institute was also a centre for training and research, and the observations carried out in it formed the basis for Lowenfeld's book Play in Childhood, published in 1935.[18]

The specific link with crime and delinquency, which had been so

important in the genesis of the Clinic, was institutionalised in the Institute for the Scientific Treatment of Delinquency. In 1932, the Home Office published a controversial report by Grace Pailthorpe. Pailthorpe had investigated the psychology of criminals, and compared them with inmates of non-penal institutions. Conceptualising the problem in terms derived from the new psychology, she found the presence of mental imbalance - mostly stemming, it appeared, from something wrong in their families - in a large proportion of cases in both types of institution, although she was hampered by the lack of adequate means of assessment of character. And she condemned the prison for its lack of reformation, because it did not try to investigate, diagnose or treat the psychological problems which had led to crime. Inspired by Pailthorpe's radical programme for the psychologisation of penality, the Institute for the Scientific Treatment of Delinquency was established in 1932, and opened its clinic in 1937. The Institute, which was directed by Edward Glover, sought to apply scientific methods of disgnosis and treatment to delinquents. Associated with it, in one capacity or another, was virtually everyone who had been active in the new psychology, and it applied the whole range of psycho-therapies to delinquent individuals referred, in the main, from the Juvenile Courts and the probation officers. Such a psychologisation of crime would have a bright future after the Second World War.[21]

But the type of clinic which began to spread during the inter-war period was not an exclusive site for the treatment of delinquents, nor based on Lowenfeld's quasi-Kleinian model, nor (despite the fact that financial support came from the Commonwealth Fund) on that developed in the United States. It was rather the Tavistock model, grounded in the new psychology. The Child Guidance

Council opened its first Demonstration Clinic in Islington in 1928 with Dr William Moodie as its director, and Dr Lucy Fildes as its psychologist. The range of children referred exemplifies the systematisation of the field of childhood pathology which the child guidance movement had established; backward children referred from the schools, delinquents coming from the courts, children referred for nervousness, being unmanageable, lying, stammering and so forth. Although the London County Council declined to finance the Islington Clinic when Commonwealth Fund money ran out in 1933, by that time the principle of local education authority clinics had been established, by the foundation of a clinic at Birmingham. This was set up as part of the Birmingham Education Committee's special school service in 1932, directed by the Medical Officer for Special Schools with a local education authority psychologist and a psychiatric social worker on the staff.[22] In 1935, when the private funding which had made this possible ran out, the Board of Education approved local education authority funding, thus establishing the principle of state maintained clinics. It also empowered local education authorities to contribute to voluntary Child Guidance Clinics in respect of services provided for children referred by school medical officers. By 1939 there were 17 clinics wholly maintained and 5 partly maintained by local education authorities, in addition to a number of clinics established by voluntary bodies or hospitals.[23]

The various publications of the Child Guidance Council in the period from 1931 to 1939 enable us to make a kind of synopsis of the way in which the clinic was supposed to function.[24] The clinic would receive children across the whole range of pathologies for assessment, diagnosis and treatment and from all the institutional sites where such children came to notice, especially the courts and the schools. In addition to performing treatment itself, it might

distribute the child to one or other of available forms of specialised agency, or provide reports and advice to other agencies of allocation. Agents attached to the clinic or working closely with it - social workers, psychiatric social workers, probation officers, school attendance officers and so forth, could use it as a focus, radiating out from it into the environment and the home, moving between the sites of assessment, treatment and prophylaxis, beginning to sketch out the contours of a psycho-social strategy of regulation. At first limited to carrying information, increasingly these social workers annexed to themselves a directly therapeutic role, as we shall see later. At the level of their organisation therefore, Child Guidance Clinics made it possible to apply something like a neo-hygienic strategy to questions of mental health, with an extension of inspection to larger categories of individuals at an earlier point in their lives thus allowing the intervention to represent itself as preventive. This was made possible by the increasing scope provided by links with schools, courts, social work and other specialised agencies, which made it plausible to regard the clinic as the fulcrum of a comprehensive programme of mental welfare. The clinic was not simply to be a site of diagnosis and treatment, or of the organisation of services - it was to be a place for research and investigation. It would allow the coordination of the knowledge gleaned from work with specific individuals and families in order to produce statistical information on the psychological development, psychiatric disorders and relationships of individuals, knowledge of the links between circumstances, symptoms, treatment and consequences. This would therefore provide the conditions for the construction of <u>clinical</u> knowledge of the mental disturbances of childhood. It would allow the construction of classifications and of

norms, and hence of diagnosis in terms of deviation from normal behaviours, characteristics, abilities or developments. It would allow the move from the abnormal to the normal, as experience showed the absence of any firm boundaries between normality and pathology. It would make clear the links between minor aberrations and major disturbances both statistically and developmentally, hence allowing one to address within the same framework 'the problem of the normal child'. And the clinic itself, with its programme of training by a kind of apprenticeship, allowed the consolidation of this new knowledge and technique in the act of its transmission.

The clinics, and the knowledge produced in them, provided the basis for a concerted attempt to disseminate the norms for happy families and contented children which the new psychology had made possible. In radio talks and popular texts, as well as advice to teachers and others dealing with children, the same advice was given - how to promote adjustment and prevent maladjustment, nervousness, night terrors and all the other troubles of childhood by a judicious adjustment of family regime. Thus Emanuel Miller edited a book on The Growing Child and its Problems, with contributions from child guidance experts from the Tavistock and elsewhere, designed to bring to the attention of readers "the sorts of mild disorders which tell us that the child is troubled or maladjusted", to help them understand the nature of the early impulses and fantasies which inform the child's acts, the ways in which unconscious parental attitudes, feelings and the actions they lead to can provoke conflicts and repressions, and the means of bringing these out into the open. The book attempted therefore to "show how best to meet these difficulties, so that children may enter adult life on a path which has been cleared for them by the benevolent insight of those who guide them."[25]

The Home and Schools Council was a further important element in promoting the new psychology of child management. The Council, a federation of parent-teacher associations, published a mothly magazine, Parents and Teachers and a series of books under the title The Home and School Library. These were guidelines for parents, teachers, nurses and others to use in studying young children and bringing them up. The techniques advised were to promote Confidence, Helpfulness, Dependability and Thoroughness, avoid Fear, Cruelty, Stubbornness and Jealousy. And, as elsewhere, the main contributors were those working in the field of child guidance.[26]

Parents and teachers were now to have to accept the responsibility of regulating not their habits or morals, but their feelings, wishes and anxieties, if they were not to produce troubled and troublesome children. Two sorts of continuity were now established. The first was from generation to generation. If parents had problems with their own emotional life, if they had repressed conflicts, anxieties and so forth, they would build these unconsciously into their attitudes and relations to their children, and hence provoke and produce those same difficulties in their offspring. And there was also a continuity of the normal and abnormal, for if families did produce normal children this was because they regulated their emotional economy correctly. But the line of division between correct and incorrect emotions was a narrow one, and the slight exaggeration of normal feelings and wishes which might come from one's own difficulties was sufficient to disturb the harmony of the child. It was thus all too easy for major problems to develop from minor and normally inconsequential upsets if they were not handled correctly. A constant awareness of one's feelings, a constant willingness to discuss, to recognise, to evaluate the

emotional interchanges of family life was what was required in the name of mental hygiene of the individual and society. For the new psychology, normality was conceived of as no more, or no less, than the absence of symptoms, and the lack of unconscious conflict.[27]

And the new psychology of the clinic had yet wider social aspirations. A series of talks on the BBC instructed the nation on How The Mind Works, including discussions not only of the problems of child development, by Emanuel Miller and William Moodie, but also of the way in which a knowledge of the mind could help one understand the problems of politics, religion and nationalism.[28] In this vein too were the contributions by Ginsberg, Seligman, Crichton Miller, Emanuel Miller and J C Flugel to the volume that Hadfield edited, entitled Psychology and Modern Problems.[29]

But if such activities were principally directed towards politicians, intellectuals and well-to-do families, the Child Guidance Clinic offered also a more specific and directed opportunity for psychology. This had as its target the working class family, whose children so often showed problems at school, and were so likely to become delinquent. In the clinic there was the possibility of the development and promulgation of a new type of practice in which psychology would provide a clinical expertise independent of medicine though linked to it - one in which medicine would occupy a subsidiary and delimited role. A site had emerged where psychology could become an effective social instance, not on its own but in alliance with non-medical agents - social workers - in a new psycho-social strategy.

The psycho-social strategy

Margaret Yelloly, in a well researched analysis, has sought to demonstrate the limited impact of psychoanalysis on British social

work in the thirties, especially in comparison with its influence in the United States.[30] She argues that even the areas of social work most affected by it were eclectic rather than psychoanalytic. These were the child guidance movement and the Mental Health Course for psychiatric social workers, also sponsored by the Commonwealth Fund, which started in 1929 at the London School of Economics. Teaching of psychology and psychiatry on this course was undertaken by individuals who were not themselves analytically trained and who held a variety of reservtions about psychoanalysis. Some of those closely associated with the course - for example Edward Mapother of the Maudsley Hospital, who was involved in the initial discussions, and Alfred Tredgold, who taught the section on mental subnormality - were actively hostile. The leading figures of the child guidance movement, such as William Moodie, were at pains to allay the anxieties of the education committees, the Ministry of Education and the public that they were 'psycho-analysing' those referred to them. The psychiatric hospitals, which, like the Child Guidance Clinics, provided fieldwork experience for students on the Mental Health Course were also, she argues, virtually untouched by psychoanalysis in this period.

In any event, the numbers of those trained and practising psychiatric social work before the Second World War were very small. According to Timms, in the decade from 1930 to 1939, 165 people were trained on the LSE course, which was unique.[31] And Yelloly argues that these small numbers were without substantial influence on social work more generally. They had a separate professional organisation, the Association of Psychiatric Social Workers, and were by and large employed in the specialised institutions of clinic and mental hospital. She cites figures to show that of the 86 members of the

Association of Psychiatric Social Workers employed in Britain in 1936, 55 worked in clinics and mental hospitals, 4 in teaching or organising work and only 27 in other forms of social work - a number that was not on the increase.[32] Psychiatric social workers were separated from social work more generally, and were viewed with suspicion and a certain amount of hostility. She suggests that there was little trace of psychoanalytic influence in the literature in family case-work and almoning prior to the Second World War. The exception was the Charity Organisation Quarterly, whose frequent references to psychoanalysis she takes to be a consequence of their belief that it supported their individualistic approach to social problems.[33] And Yelloly sees family case-work over this period as retaining its association with poverty and material relief, the worker as co-ordinator and dispenser of resources. She cites Elizabeth Macadam, writing in 1934, to support her case. Macadam wrote of family case-work that it:[34]

> seeks to assemble for the benefit of the family which has fallen on evil days the particular forms of help required - the outfit for the father who has providentially found work, blankets, coals or boots which are lacking after a long spell of unemployment, spectacles to enable the grandfather to read his paper, convalescent change or rest for the mother, and a home help to take care of the children in her absence.

No doubt Yelloly's analysis points to genuine limitations on the extension of the psycho-social strategy in the inter-war period. But her characterisation of the first half of the twentieth century in purely negative terms, as a "withering of the promise of the later 19th [century]" is in part a consequence of the perspective from which she constructs her historical investigation.[35] As we have

already pointed out, writing from the point of view of post-war British social work tends to obscure just how significant a transformation was involved in the development of welfare work in the first decades of this century. And Yelloly's prioritisation of psychoanalysis, as the indicator of social work's modernity obscures the extent to which the central characteristic of the psycho-social strategy was not that it was a realisation of the principles of Freudian theory, but an operationalising of the new psychology and its conception of the nature of the family and its role in the production of psychic and social maladjustment. However confined was its inter-war field of application, the alliance between a type of psychology and a type of social work had significance for the transformation of both in the post-war period. It provided conditions for the lessons of the war to be learnt in a particular way, and for the generalisation of a familialised psychological social work in the fifties. What was this psycho-social strategy?

When William Moodie considered the role of the social worker in his discussion of child guidance by teamwork, it was clear that her role was still the familiar one of co-ordinator and relay. The social worker conveyed "advice and instructions from the psychiatrist which he could not himself afford the time to discuss", discussed practical difficulties with the parents, obtained information on home conditions and "had the duty of discovering and arranging all necessary social activities, Scouts, clubs and so on".[36] Yet over the thirties this role began to transform. What apparently happened was something like this. Social workers attached to Child Guidance Clinics would go into the homes, talk to the parents - or usually the mother - about home conditions, material circumstances and so on, and try to explain the work of the clinic. But these workers found that a sort of emotional tie-up was developing with the mother which

initially seemed to be a problem as it was hampering the objectivity of the information gained. Instead of finding out what actually happened, one would find out what the mother wanted the social worker to think had happened, or what she wanted to happen, feared would happen, or thought would happen.

But a slight shift of perspective turned this apparent disadvantage into a valuable opportunity. For a link could now be drawn between the child's problems and these beliefs, wishes and fears of the mother. Suddenly the child's problems seemed themselves not the point at issue. They were only the signs of, and the consequences of, the feelings that the mother had about the child - the signs of a problem in the emotional relations of the family. And this one relationship - between the mother and the child - was revealed in another - between the mother and the social worker. What was going on in the social worker's interview was not the gathering of information but the manifestation of feelings - a sort of transference. These were feelings which the mother herself was not aware of - unconscious beliefs and wishes, feelings of guilt and disappointment and so on. But in the relationship with the social worker these unconscious aspects could be made conscious, the mother could be made aware of her phantasies, desires, conflicts which had been at the root of the disturbances of the child and hence remove herself and the child from their sway. In short, the relationship of the social worker to the mother could become therapeutic.[37]

Of course, this transformation - from welfare work to social work - was by no means the simple effect of the experience of those attached to the child guidance clinics nor, for that matter, of probation officers who developed a similar conception of their role. It was, rather, a consequence of the way in which this 'experience'

was construed. In the late twenties and thirties leading ideologues of the Tavistock Clinic, the Mental Health Course, the Central Association for Mental Welfare and similar groupings actively sought to promote a way of conceiving of social work which would legitimate a claim to professional status and an independent role in therapy. Psychology was to provide the specialised knowledge upon which this claim, and this role, would depend. Thus in 1926, Evelyn Fox in an unpublished memorandum on the training of social workers, submitted to the Joint University Council for Social Studies by the Central Association of Mental Welfare, argued that it was essential to provide psychological training as a part of the necessary eqiupment of every social worker.[38] Psychological knowledge was essential for the daily judgments that social workers had to make in their dealings with social misfits ranging from maladjusted and delinquent children to those showing effects of mental stress as a result of home conditions, poverty or unsuitable employment. What psychology was to provide, wrote Fox, was a knowledge of the factors influencing the reaction of an individual to his environment.

So the new psychology was to enable social workers to understand that the individual was no longer merely the expression of its heredity or the product of social training. The individual was endowed with a certain force, it entered into a dynamic relationship with its surroundings. Each interchange between the individual and the environment affected the individual itself; the cumulation of these little interchanges was development. The psyche of the adult was now construed as shaped by the dynamics of the reactions of an individual to his or her environment over the course of their life up to that point - a dynamic individual psychology was necessarily developmental. In the normal case, what was produced was a relationship of individual to environment which could be termed

'adjustment'. But sometimes something would go awry, and the consequence would be 'maladjustment'. Let us trace out the discussion of these questions in the literature of social work.

A paper by Alice Raven, published in 1925, shows a first attempt at this.[39] Human beings were endowed with a store of energy which sought outlets along certain channels - instincts - of self-assertion and submission, of sex or reproduction, the parental instinct, the herd instinct. The human being became an adult when these instincts were <u>socialised</u> by being <u>sublimated</u> - bound up with ideals of conduct. Hence the parental instinct would be channelled into a desire for the welfare of the child; the sexual instinct, through marriage, would be bound to faithfulness and devotion, and so on. Problems arose however when the psychic energy failed to find an outlet; then it would show itself in all manner of ills: signs of discontent, restlessnes, lack of concentration, fits of ill temper, jealousy, exaggerated self- esteem or self- pity, a tendency to phantasy often heightened by the use of artificial stimulants. The social worker could right this wrong in the mental development of the individual, find a useful outlet for unused energies in these 'neurotics' and 'difficult cases' through sympathy, encouragement and the inspiration of hope, self-respect and self-confidence.

In this account there was a separation between the register of the familial and the register of the psychical: the environment was made up of all those things outside individuals which impinged upon them in the form of experience hence facilitating or obstructing the appropriate channelling of the instincts. But for the psycho-social strategy to be able to operate, it was not just the psyche that would have to be re-conceptualised. The environment would also have to be re-construed in terms of <u>other people</u>. Thus, in an article on

psychiatric social work, Robert Gillespie stressed that children's 'nerves' were a product of their relation with other people in their family - the attitudes of brothers and sisters, mothers and fathers, disharmony in familial relations.[40] It was information on these questions which the social worker had to discover and bring back to the psychiatrist treating the child. Gillespie gave some examples: a boy who stole, lied, wet his bed and bit his nails - discovered in the school - turned out to have a father who thought he was in a degrading job, who had a critical attitude to others, and a mother who was proud and thought she had married beneath her. Here the information gleaned by the social worker on the family relations revealed the problem - the child was not loved enough. A girl who was timid, full of aches and pains, a bad sleeper, turned out to have an over-anxious mother who sought to care for and protect her daughter against all dangers - here the child was loved too much. Another child was over-protected because the mother felt guilty at wanting a son and producing a daughter - here the child was not loved for what she was.

Reading through this literature, one rapidly becomes familiar with the range of these family parables without which no article is complete. Hugh Crichton Miller recounted the following in his discussion of 'The Unconscious Motive of the Juvenile Delinquent':[41]

- the regressive juvenile to whom infantility and mothering have become too attractive, who is afraid to grow up, of responsibility, of making the effort;

-the unwanted child, who steals because she feels she is not wanted, not loved or valued for her own sake - because she is illegitimate, or a girl whose parents desired a boy child;

- the child who uses delinquency as a weapon against his parents because they have projected the disappointment and feelings of their

own lives onto him;

- the child defrauded of love, who uses his delinquency to get his own back at his parents, becase he is jealous of the loss of his mother's love to a younger sister or brother.

Cosens summarised the many sad ways in which love might go wrong, and their consequences, in the following terms:[42]

> If in childhood we have our sense of individual capacity cramped by a pampering and protecting and possessive parental love, or by an oppressive sense of our inadequacy founded on some physical or mental handicap, the result is likely to be either a nervous and over dependent attitude that wants someone to lean on all through life, or, the other extreme, a rebellious assertive attitude that intends to make itself felt, by fair means or foul, in spite of the protections and prohibitions of possessive love, or in spite of the hated limitations that we can't adjust to. Again, if in childhood we find ourselves unwanted by any loving parent, or substitute for a parent, we are likely to choose one of the same two opposite reactions. On the one hand we may retreat into nervousness, and perhaps compensate by loving ourself in a daydream world of which we are the centre, or we may engage in a perpetual search for a parent substitute to lean on. On the other hand, we may compensate by exaggerated satisfaction in our own feeling of power and capacity, self assertion, self love and egotism making up for the fact that our love is not allowed to go out to its natural parental end.

And as the thirties progressed, social workers and probation officers increasingly began to draw certain conclusions from these arguments. If the problems of the child lay in the wishes, feelings

and beliefs of the parents, and if the person most in touch with these was the social worker, then social workers could be more than conveyors of information, psychiatric aids. Social workers, that is to say, could have a directly therapeutic role. For the key thing about these disturbed and disturbing family relations was that the things that motivated them were unconscious. What the social worker could do was to reveal the fundamental roots of anxiety behind their apparent immediate causes, reveal the conflicts which underpinned them, bringing insight to family members and hence acting therapeutically - resolving the problem of the child by acting on the problems of the parents. The social worker could reveal to those concerned that the difficulties, disturbances, delinquencies of the child were but a sign of the conflicts, fears and wishes of the parents - problems which themselves had their roots in their own emotional relationships with their parents. A new form of family history had been constructed, in which the psyche and its relations were sufficient to transmit trouble from generation to generation without invoking any hereditary mechanisms. And simultaneously a therapeutic familial social work had become possible - for if the problems lay not so much in the child as in the family and if disturbances in the former could be resolved by actions upon the latter, who was better placed to act on the family than the social worker.[43]

It is true that British social work of the inter-war period did not produce any sustained theoretical and pratical account of this new psycho-social analysis and technique - no English Mary Richmond or Virginia Robinson.[44] Sybil Clement Brown was clearly stating a wish as much as a fact when she wrote in 1939 that the "kind of social worker we have come to describe as 'psychiatric' represents,

to my mind, a stage of development of social case-work as a whole, rather than a distinct profession."[45] But the methods which she described in another article of the same year were indeed those which would characterise British social work in the post-war period.[46] And the investigations which she undertook illustrated that their prevalence was on the increase before the outbreak of war. Of the 80 case records which she studied in her comparison of 1924 and 1934, those of the earlier date were apparently principally concerned with such kinds of behaviour as cleanness, honesty, sobriety and with material conditons. Those from 1934, she claimed, were concerned on the other hand, with aspects of personality and with the specific nature of family relations. The change presumably resulted, she commented, "from the growing conviction that social problems are more dependent upon the attitudes and intimate social relationships of the individual than upon his superficial habits and surroundings".[47] The social worker was now to use the interview not to record circumstances, but the individual's attitude towards circumstances. Events, experiences and attitudes recounted could no longer be taken at their face value, they must be interpreted in terms of the unconscious wishes which gave them a meaning for the mother, and the unconscious elements in the mother's relationships to the social worker which coloured her account.

The terms of description were now far from those entailed in the psycho-eugenic conception of character, or the neo-hygienist conception of welfare. What were salient now were not sobriety, diligence and thrift, nor cleanliness, healthy diet and hygiene. They were fears, early experiences, anxieties, attitudes, relationships, conflicts, feelings of persecution, wishes, desires, phantasies and guilt. The way of resolving problems was not segregation or sterilisation, nor moralisation by instruction in

virtue and technique. It involved 'becoming aware of the conflicts', 'learning to handle the problem', 'coming to understand oneself', 'sorting out one's real needs'. This was the psycho-social strategy, through which psychological knowledge would provide the rationale for a complex and expanding system of social regulation of personal life in the post-war period. But this was not through the medium of psychologists themselves, but through this new social work; as professional agents, psychologists remained in a secondary and subordinate role in the clinic, testing but not diagnosing, supplying information but not directing treatment. Why should this have been?

The temperament of individual psychology

Cyril Burt had seen the Child Guidance Clinic as a site in which psychological expertise would be dominant, coordinating and integrating information from the other disciplines, diagnosing and directing treatment.[48] But in England between the wars this was not to be. By 1939, only two of the forty-three English clinics were directed by psychologists; the others were all under medical direction.[49] The opposition between the claims of medicine and those of psychology, which we saw previously in relation to the problem of feeble-mindedness, was extended to these other behavioural disorders of childhood. This opposition traversed the child guidance movement throughout the thirties and, indeed, does so until the present.[50] From the early thirties the medico-psychiatric position was in the ascendancy. When Dame Evelyn Fox resigned as Honorary Secretary of the Child Guidance Council, she was replaced by Dr William Moodie, and the Council adopted the policy that all clinics should be under medical direction.[51] The division of labour was clearly laid out in Moodie's Child Guidance by Team Work, published in 1931, and in the

different topics discussed in psychiatrists' and psychologists' sections of the Child Guidance Council's Inter-Clinic Conferences. Psychiatry was the directing science of the clinic. It was a branch of medicine which covered the normal and abnormal mechanisms of the mind, their diagnosis and treatment. Psychology was essentially the study of the operations of intelligence and its measurement by standardised techniques, but included also testing using other devices - what psychology was, however, was clear: it was the technique of mental testing.[52]

By 1939, when the Medical Director of the Child Guidance Council edited A Survey of Child Psychiatry, designed to publicise the experience gained in British, as opposed to American, child guidance work, the 'medicalisation' of the clinic was evident.[53] As Henderson and Gillespie had hoped in 1932, psychiatry had indeed become the expertise competent to manage the behavioural disorders and emotional troubles of childhood. In the medical arguments, explicit and implicit, for such a role one sees the reactivation of those points which had succeeded in relation to the inspection of school-children and the ascertainment of feeble-mindedness. One had before one a troubled child, and the cause of these troubles might be anything from a physical illness, through an organic mental illness, to a 'family neurosis' or troubles at school. One needed information on physical, mental, familial and social conditions supplied by all the various members of the child guidance team. But the diversity of sources and professions made it all the more important that one person was responsible for integrating all this information and taking a decision in relation to it, and only a medically trained agent was competent to assess the weight of all the different factors involved, to make a differential diagnosis, and to decide on treatment in that light. MacCalman quotes with approval the views

expressed in a review of American child guidance work: "Training in medicine with psychiatric emphasis is more likely than other professional training to bring to the clinic the leadership which will ensure a consistent orientation to the total organism."[54]

And indeed medicine seemed to have assimilated the lessons of the new psychology. The first section of the Survey discussed the influence of physical diseases upon maladjustments of behaviour, Winnicott contributing a paper suggesting that the potential depressive was often mistaken for a rheumatic and proposing a sort of psychoanalysis of pain. The second section discussed problems relating to mental illness, ranging from psychoses (organic and untreatable, according to Gillespie) to 'the family neurosis'. Bowlby's paper on hysteria stressed the need to look for physical causes such as smouldering appendicitis, as well as the child's personality and the emotional atmosphere in the home - quarrelling parents, fussy mothers, mothers playing on their children's affections and trying to buy their children's love. And William Patterson Brown described, in familiar terms how "Neurosis is a family problem... the seeds of neurosis are sown in childhood in a neurotic family setting". The child became neurotic for the familiar reasons: as a result of the unconscious play of hostility between the parents; the mother compensating for her husband's lack of masculinity by projecting her concern onto her boy child; anxieties, guilt or martyrdom leading to over-mothering or under-mothering and so forth. The articles on family, school and social maladjustment, and juvenile delinquency were also contributed by doctors, and construed the problems in similar terms.

Physical factors and diseases had to be considered, diet taken into account, there were differences in the mental apparatus of the

child itself, these differences were affected by the way in which the parents managed the rituals of waking, sleeping, feeding, bathing, urinating and defaecating, and by the play of their own fears, anxieties and hostilities across the psyche of the child. If all these failures of adjustment were caused through such a complex interaction between social, familial, mental and physical conditions, and if each case was the consequence of a unique concatenation of such factors, medicine was surely the only instance capable of differential diagnosis, for it was the only one which possessed a clinical expertise. Psychology had a role which was specific, delimited and subordinate: to supply information on the mental equipment of the child derived from the administration of mental tests.[55]

The notion of psychology as the science and technique of mental measurement was certainly not anathema to the individual psychologists. Indeed, despite the occasional urging, by those who had abandoned the new psychology in favour of psychoanalysis proper, that psychologists in the clinic should free themselves from the limitations of testing, psychology accepted this role as if it was its destiny.[56] It had been formed as an effective discursive practice in the image of the test; measurement was the horizon of its thought and it could not think outside it. This is not to say that psychology wished to limit itself to the assessment of intelligence. The existence of the clinical site, and its rationale, provided the impetus and the possibility for the extension of assessment along two inter-connecting lines: the notion of development as a principle of organisation for psychological thought; and the notion of temperament as a new object for psychological quantification. In both these fields, English developments were very much subsidiary to those which took place in the United States of America.

The clinic and the nursery school made a psychology of development possible. Of course the mind and behaviour of the growing child had been an object of psychological discussion prior to the 1920s. The new psychologists of development ritually acknowledged the pioneering detailed studies of the development of individual infants and children undertaken by Darwin, Preyer, Shinn, Sully, Claparede and Stern, as well as the observations collated under the impetus of the Child Study movement.[57] But the problem with such investigations was their idiosyncracy, their anecdotal quality, their lack of systematic observation, the absence of consideration of the effects of surroundings, their variable methods, their lack of comparability - in short, their lack of scientific rigour. However suggestive their reflections and observations, whilst they directed our attention to the ways in which the abilities of children changed over time, they did not themselves found a psychology of childhood.

But what the clinic and the nursery school made possible, it was argued, was precisely such a psychology. For they allowed the observation and collection of data covering numbers of children of the same ages, by skilled psychological experts, under controlled, experimental, almost laboratory conditions. They thus simultaneously allowed for standardisation and for normalisation - the collection of comparable information on a large number of subjects and its analysis in such a way as to construct norms. A developmental norm was a standard based upon the average abilities or performance of children of a certain age on a particular task or in a particular activity. It thus not only presented a picture of what was <u>normal</u> for children of such an age, but enabled the normality of any individual child to be assessed by comparison with this norm. In the movement that was

characteristic of the psychology of the individual, the individual subject in its uniqueness and variability could become the object of scientific investigation when it was viewed from the perspective of the population of which it was deemed a part.

What the clinic and the nursery school also made possible was the formation of a psychological conception of development. The gathering of data on children of particular ages over a certain span, and the organisation of this data into age norms, enabled the norms to be arranged along an axis of time, and seen as cross-sections through a continuous dimension of development. Growth and temporality could become principles of organisation of a psychology of childhood. And normalisation and development enabled individuals to be characterised in relation to such norms in terms of this axis of time - as 'normal', 'advanced' or 'retarded'.

Whilst the construction of the test of intelligence had made this possible in the restricted sphere of the intellect, it was now feasible to utilise a fundamentally similar approach in a much wider domain.[58] The work of Arnold Gesell and his collaborators is testament to the potency of this new mode of conceptualisation for the generation and organisation of vast quantities of psychological data on childhood into a coherent conceptual schema.[59] This work was initiated at the Yale Psycho-Clinic which had opened in 1911 for the observation and treatment of children having problems at school. As befitted its hygienic rationale, the Clinic was located in the New Haven Dispensary which held weekly baby-welfare conferences across the hall, and it soon began to have some 'normal' children in attendance.[60] The Clinic was used as the basis for the selection of a sample of children of certain ages, who were visited and assessed at home, as well as for the detailed observation of children by means of the invention of various technical devices to keep the observers

hidden from those whom they studied. Behavioural items characteristic and distinctive of the various age levels were defined, and organised into scales in four fields of behaviour - motor, language, adaptive and personal-social - with a specification of the ages at which a given proportion of children could achieve various levels on each scale. Gesell's work brought non-intellectual behaviour within the sphere of psychological evaluation. Norms of posture and locomotion, of vocabulary, comprehension and conversation, of personal habits, initiative, independence and play could now be deployed in evaluation and diagnosis.

In the following years, others attempted to utilise the same tactics in relation to more highly specified and practically important questions.[61] Katherine Banham Bridges' attempt to produce scales of emotional and social adjustment was the work of this type which was most often referred to in the English discussions.[62] Bridges had adapted the method of Gesell for the nursery school, which, she asserted, served as a laboratory for the study of children's development. But whilst Gesell's scales merely sought to organise and normalise different sorts of behaviour which children manifested, Bridges sought to investigate social and emotional behaviour in the familiar terms of adjustment. The social development scale ranged items in terms of "the acquisition of an increasing number of socially accepted reactions with regard to others, and... the evolution of more and more adequate or suitable adjustments to social situations."[63] Similarly, emotional development was evaluated in terms of "the decreasing frequency of intense emotional responses... the progressive transfer of responses to a series of stimuli determined by experience and social approval, and... the gradual change of the nature of the overt responses in

accordance with social dictates... an increase in ability to adjust to emotion-producing situations."[64] The criterion of social approval and the conception of adjustment enabled the developmental normalisation of the scale to comply with the requirements of a socially normalising practice of evaluation and intervention.

The Bridges scale did not meet an enthusiastic reception in England. On the one hand, the concepts and techniques of the scale were anathema to the mode of investigation favoured by the analytically inclined. Susan Isaacs commented on Bridges work ascerbically that "the rate of change in children towards behaviour which is considered desirable is not more significant psychologically than the actual behaviour which they do show at any given stage".[65] Even Isaacs, however, could not fail to recognise the value of the scales in introducing normativity into development:[66]

> It will not only provide norms for individual development, with far reaching effects on educational standards and techniques. It will also suggest significant inter-relations of psychological processes, by showing which aspects of development tend to hang together, and outlining the changing picture of their inter-relations at succeeding ages (in the way intelligence tests have done for certain aspects of intellectual development).

But, whilst Isaacs gradually introduced discussion of Gesell's norms of development into her advice to parents, she argued that the scales produced by Bridges oversimplified and homogenised psychologically distinct aspects of behaviour, implied a single and unbroken axis of development towards adjustment, and were founded on the belief that behaviour could be measured outside the specific concrete situations in which it occurred and which gave external events their inner meaning and significance in the psychic life of the child.

In fact Gesell himself had argued in a somewhat similar way about the use of his scales. Whilst stressing the value of the scales in encouraging the cultivation of the normative and comparative thinking necessary for clinical work, much of his text of 1925 was a polemic against psychometrics, for substituting the mechanical application of a partial measure for the complex process of interpretive diagnosis which a clinical psychology required. But nonetheless it was the psychometric objections which formed the other, and probably more influential, prong of English opposition to the scales. A scale is not, after all, a test. Bridges reckoned that one month of daily observation was required to complete the schedule for her scales. And the scale was linked only in a tenuous and ex post facto way to a theory of what it was supposed to be measuring in terms of the inherited or acquired mental capacities of the child. When English psychology approached the new problem with which it had been presented by the clinic, this was the issue that concerned it - the development of techniques for measuring the non-intellectual mental capacities which were manifested in the behavioural disturbances of childhood and the delinquencies of youth. The problem was one of devising a test of the manifestation of instincts and energy in dispositions, sentiment and character - of constructing a test of temperament.

In the late twenties and early thirties, the psychology of the individual sought to constitute a new object - the temperament. Though initially somewhat hesitantly designated (character, temperament and personality were given different significance in the different texts) this referred to that which the old faculty psychology had designated 'will' - the domain of strivings, of drives

and instincts, of purposive behaviour. Of course there was a venerable philosophical and psychological literature on the issue of the will, its nature and development. But the problem for the psychology of the individual was a new one. It was one of measuring the nature and force of 'will', characterising its direction and its strengths and weaknesses, assessing that of one person in relation to another, or to the population at large. Individual psychology could conceptualise this domain only insofar as it was measurable, differentiable, insofar as one could submit it to the techniques which had been so successful in the annexation of intelligence to psychology. But temperament proved less tractable to psychologisation, and in this fact was grounded the interruption of the development of clinical psychology.

In fact the United States of America was the place where the psychology of the will really got off the ground. There was a proliferation of 'dynamic' theoretical systems, of synthetic texts of one sort or another, and of techniques of assessment. Authors vied with one another to promote catalogues of personality types, character dimensions and temperamental traits.

There were developments of behaviourist and quasi-behaviourist learning theories, for example E B Holt's (1915) The Freudian Wish and its Place in Ethics; R S Woodworth's (1918) Dynamic Psychology; E C Tolman's (1932) Purposive Behaviour in Animals and Men; E L Thorndike's (1935) The Psychology of Wants, Interests and Attitudes. There was the construction of the related concept of attitude and its measurement in the work of Thurstone (1931) and Likert (1932). There were developments from Gestalt psychology and the synthesising texts of Stern ([1935] 1938), Allport (1937) and Lewin (1935), which sought in one way or another to characterise personality as a dynamic unity. There was the work which tried, in different ways, to integrate

psychoanalytic concepts with experimental findings - notably that of Henry Murray at the Harvard Psychological Clinic, gathered together in Explorations in Personality (1938), and that of Dollard, Doob, Mowrer and Sears, at the Yale Institute of Human Relations, laid out in the 1939 monograph Frustration and Aggression.

Sheldon (see his text of 1942) developed Kretschmer's ([1921] 1925) Typology of Body Type and Disposition, reworking the original dichotomy of slender or spindle-shaped individuals with a schizoid disposition versus globular, rounded types with a cycloid disposition, into a tripartite division of body build into endomorph, mesomorph and ectomorph with associated types of temperament - a trend of research which generated much controversy, and a plethora of publications. There were schemes based on Jung's (1921) description of introverts and extraverts and Abraham's (1925) oral and anal types. A plethora of assessment techniques were devised. Inventories were developed from the scheme Woodworth produced in 1919 for the evaluation of army recruits. Rorschach's (1921) scheme for assessing personality based on the influence of the individual's affective life upon their perceptions, was developed in America by Levy and Beck (1937). Morgan and Murray (1935) developed the Thematic Apperception Test, which sought to assess aspects of personality by evaluating subject's responses to a standard set of ambiguous pictures. There were attempts to evaluate personality on the basis of handwriting, like those of Downey (1919) and Powers (1933). When Raymond Cattell, who like McDougall went to work in America, published his attempt to establish the primary traits of personality in 1946, Lewis Terman estimated in his introduction that the past twenty five years had seen over one thousand publications in the field of personality, including over one hundred on a single test.[67]

Compared to this massive American psychological colonisation of the domain of the personality, the developments in England might appear somewhat meagre. It is true that no major schools vied with one another, no lasting theoretical syntheses were published. What occurred was more modest, more practical and, in the end, more constraining. For it was organised around the search for a means of assessment which would solve the problems faced by all those who were interested in character and temperament because they had to take decisions in the light of it - in the work of vocational guidance, in decisions as to the treatment of juvenile delinquents and in the child guidance clinics. Again and again contributors to these discussions remarked on how little progress had been made in this field for many years, how little had been contributed by academic and philosophical reflections on the will and character. And how it was under the pressure of practical concerns that a new way of approaching these questions had been forged - one that started from the problem of assessing the temperament of the troublesome individual with a view to making a decision or recommendation as to action.

From about 1925 onwards, regular papers began to appear in the pages of the British Journal of Psychology on the development and evaluation of tests of temperament. These took their place alongside the material that was its staple diet in the inter-war period: articles on intelligence, its analysis, assessment, new statistical methods, comparisons of differences between groups and so forth on the one hand, and on the other all that material which had as its organising focus the problems of industry, notably those of efficiency and fatigue - attention, discriminative ability, auditory and visual perception, effects of training on the senses and skills, reaction time, fatigue and so forth. Authors agreed that the

existing state of techniques for the assessment of temperament was something like that which had characterised the evaluation of intelligence at the beginning of the twentieth century - none of the available devices was reliable or exact enough to be of much practical service in the diagnostic activities of the clinic or elsewhere. Cattell minimised the difficulties in the book which he published in 1936, which was introduced by an enthusiastic foreword by William Moodie. This was a sort of compendium of all the schemes of tests available - intelligence, aptitudes, interests, attitudes, object libido investment, temperament, character and emotional adjustment - intended to act as a practical handbook for practicing psychologists.[68] But a rapid review of the various routes which the psychology of the individual took in order to find a means of diagnosis appropriate for the new problems of maladjusted and delinquent children will demonstrate why it was that it was not able to take up the clinical role to which it had aspired.

In his Inquiries into Human Faculty, Galton had devised a method of investigation involving word associations. He would present himself with a word, see which other words came to mind, and analyse the associations in various ways including timing how long it took to produce them, showing how even apparently inexplicable connections could be made intelligible when linked to long forgotten memories, and that whole strata of mental operations had lapsed out of consciousness.[69] This method of word association had much in common with that utilised in psychoanalysis, and Jung's Studies in Word Association had been published in translation in 1918.[70] Jung had sought to use word associations in a large scale testing programme to investigate the existence of unconscious complexes. He observed the appearance of delay in response to certain words,

coupled with various 'indicators' of the existence of a 'repressed complex''- blushing, coughing, sighing, stammering and so forth - and not only suggested that such techniques could be used as a starting point in analysis, but also that one could use them in personality typing. In The Young Delinquent, following American studies, Burt sought to put this test to a more prosaic use, interspersing items such as 'money, 'anger' and so on in the list of words, measuring reaction times, and comparing results with delinquents with those from a thousand 'normals'. The significant results - those that were unusal or delayed - could not only be used "to lay bare the man's deeper emotional interests, but also to unveil a guilty consciousness of some specific crime".[71] But while this served as an individualised mode of investigation of emotional life, it hardly provided the standardised and normalised assessment technique which individual psychology desired.

The same was true of the second technique for the assessment of temperament which was based upon psycho-galvanic reactions - alterations in skin conductivity to a small electrical current excited by some particular word, name, object, picture or question, registered by a deflection on a galvanometer. Prideaux and Smith had suggested the use of this technique for the measurement of the emotions in the early twenties and again the suggestion was that it could be used for an exploration of feelings, perhaps in combination with the word association method.[72] But this technique, and the similar suggestions for the utilisation of other devices initially constructed in the assessment of reaction times for this new end, suffered from a number of major drawbacks - principally that one didn't know what one was measuring and that such an essentially investigative device did not admit of ranking, scaling and the comparison of individual scores with population measures in order to

effect a diagnosis. The same appeared to be true in the end of another possible device for assessing the presence of 'complexes' - the Pressey X-O test -despite the attempts of some to standardise it and produce British norms.[73] And the Rorschach Test, however suggestive it might similarly be in individual cases, was for the same reasons unable to carry out the task which individual psychology required of it.[74]

This is why so much attention was paid to June Downey's Test of Will-Temperament.[75] This was a test based on the principle that temperamental qualities were expressed in muscular movements. The subject had to write in various ways - normal, slow, rapid, disguised, when distracted and so forth - and the handwriting was then analysed to present a graph representing the 'will profile' of the individual, in terms of such traits as adaptability, self-confidence, powers of restraint and patience in detailed work. Whilst Vernon was critical of its pseudo-objectivity, Collins concluded that the test "differentiates the strong character from the weak, the careful from the careless, the quick from the slow" and was certainly tapping innate qualities. But the main problem appeared to be the low reliability of the test and its lack of correlation with any independent estimate of personality at all - again the English psychologists regretted the fact that it was more useful in suggestive explorations of individual cases than as an objective test device.

Hence the attraction of the so-called 'moral tests' like the Kohs Ethical Discrimination Test which attempted to measure moral judgment by noting how often the child singled out moral reasons for actions in preference to others. For example in the sub-test on Offence Evaluation, the subject had to evaluate different actions by

saying whether they deserved a response of praise, nothing, scold, jail, prison or kill. The tests, which, of course, provided the right answers, allowed for the calculation of a moral age and a 'moral IQ', but was considered problematic because it involved intelligence as well as character, and one couldn't really assume that what a subject said in the clinic about questions like these was a good indicator of what he or she would do on the street.[76]

Given these problems, there seemed to be only two lines to pursue. The first was an attempt to measure the strength of traits of character, and, in particular, to look for a small number of factors that seemed to be involved in all aspects of the temperament. Webb, as early as 1915, had carried out a factor-analytic study of ratings of students and schoolboys on various qualities of character and concluded that there was a general factor, which he called w (for will) involved in all the moral qualities and deeper social values. In the twenties and thirties a number of investigators tried to refine this and provide it with a theoretical basis, usually by linking it to a McDougall-Shand notion of instincts and emotions, and by analysing covariance between ratings on character traits derived from their inventories. Burt, Cattell, Oates and others sought to establish the existence of a single general, and possibly innate, factor, harking back to Burt's earlier notion of a 'general emotionality' (Cattell promoted the term 'surgency') which underpinned all those oppositions like extravert/introvert, cyclothyme/schizothyme and so forth, coupled with a number of smaller and more specific group factors. There was a sort of common fund of energy powering all the instincts, together with more specific and non-interchangeable funds attached to specific instincts - the particular combinations accounting for the temperament.[77] But again, the problem was that this complexity did not lend itself to simple

measurement, and hence failed to meet the very clinical demands which had sparked off the search. This was so despite Cattell's valiant attempt to dragoon devices constructed for completely different purposes by means of a claim, put forward more in hope than belief, that they correlated moderately with his own factors.[78]

So, despite all this labour, all that the English psychology of the individual had to offer to the clinical requirement for the assessment of character and temperament was precisely what it had sought to replace - observation of behaviour and the personal interview. It did, of course, try to put a respectable gloss on this residual position. The most ingenious idea was to offer the intelligence test itself as the solution to the problem which it had at first appeared to ignore. It now, apparently, could allow for the assessment of temperament too, by providing a standard situation in which behaviour could be observed and compared as between subjects. One could look for disparity, for example, between scores on verbal and non-verbal items in order to identify the presence of a 'verbal neurosis'. Or one could simply observe behaviour while the subject was undertaking the test, looking for such things as perseverance in the face of difficulty. After reviewing the alternatives, Earl concluded that "although little has been written about this method, it is the one most generally used in practice for personality assessment."[79]

Burt himself preferred a psychologisation of the interview. He prepared a classified list of temperamental and moral qualities and, during the course of such an interview, rated the disturbed or delinquent child on each quality, using a five point scale - holding in his mind, as he assured his readers, the standard deviation as the unit of classification.[80] But other psychologists, of a critical

inclination, cast doubt upon the validity of even these techniques.[81] In the end, it appeared, all the psychology of the individual had to offer in relation to the novel domain of character, temperament and personality which had been offered up to it by the new problems of maladjustment and delinquency was a version of procedures long utilised by medicine - and one not enriched but reduced and etiolated by the attempt to assimilate it to the impoverished conceptual structure of psychometrics.

At the very beginning of The Young Delinquent, Cyril Burt had confidently asserted that "what the method of mental testing does for the study of intellectual capacity, that the method of psychoanalysis performs for the study of the growing character."[82] But what he had in mind was the use of psychoanalysis as some sort of diagnostic tool which would enable the construction of population norms of character, personality and temperament and the assessment and diagnosis of individuals insofar as they could be located by the degree of their deviation from such norms. However orthodox psychoanalysis was a 'science of the individual' in a very different sense Not only did it problematise the links between conformity to social norms and the absence of psychical disturbances, it also eschewed the possibility of specifying general norms for evaluating psychic 'health' at all. The new psychology could form the basis for a normalising social practice by establishing precisely this link between conformity to the requirements of social and moral standards, personal happiness, and psychological health defined in terms of the absence of troublesome symptoms. But its diagnostic judgments were made within a clinical practice in which 'normality' was a standard which did not need to be assessed or bolstered through comparison with the variations of particular qualities in the population as a whole. The

whole project of individual psychology, however, depended upon such a congruity between norms of healthy mental functioning, norms of social demand and expectation, and statistical norms of the distribution of variations in a population. The psychology of the individual founded itself in the belief that the normalising intentions and evaluations of social regulation could find their objective grounding in the laws of large numbers and a congruence between statistical and social conceptions of populations and their variations. Its limits were marked out by the type of explanation in which 'to diagnose' was construed as 'to measure'.

In his famous paper on The Problem of Lay Analysis, published in English in 1928, Freud looked forward to the prospect of analytically trained 'social workers' combatting the neuroses of civilisation, and of analytic educationalists treating the inconspicuous neuroses of children as a method of prophylaxis.[83] If something of this has come to pass, we have demonstrated that the conditions for it, and the bases for the form which it would take, were established in England in the period between the two World Wars, and in the events which we have been discussing. The consequences of these developments for the rationale of government and for the regulation of social and personal existence have been revolutionary. But it was not simply the professional dominance of medicine, or the success of its tactical manoeuvres, however important these might have been, that precluded the psychology of the individual from occupying the role of secular healer of souls which Freud had proposed. One major condition for the failure of the psychology of the individual to achieve a clinical status was the mode of conceptualisation of normality and abnormality upon which it was founded.

NOTES TO CHAPTER TEN

1 The clinic, which was in Stoke-on-Trent, is reported in the Underwood Report on maladjusted children, Ministry of Education, 1955, p8.

2 Cameron, 1919.

3 This account relies on Boll, 1962.

4 My account draws upon Dicks, 1970, and the Reports issued by the Clinic from 1928 onwards - Tavistock Clinic, 1928 etc. The description of Crichton Miller is from Irvine's, 1933, sycophantic biograpy.

5 See for example, Kimmins, 1927.

6 cf Home Officer, 1932 and Dicks, op cit.

7 See Miller, 1921, 1922, and Dicks, op cit.

8 Lord, ed, 1930. cf Dicks, op cit.

9 National Council for Mental Hygiene, 1928, p27.

10 Ministry of Education, 1955, pp 7-13; Keir, 1952 ; Yelloly, 1980, pp46-52; Burt, 1955, Burbury et al, 1950.

11 Fry, 1924; Smith, 1924.

12 Strachey, 1926.

13 On English discussions of child guidance in America see Shrubsall, 1927; Crowley, 1928; Fairfield, 1928; Hardcastle, 1933. See also Stevenson and Smith, 1934.

14 Healy, 1915.

15 Quoted in the Underwood Report, Ministry of Eduction, 1955, p10.

16 Burke and Miller, 1929. Miller went on to head the Children's Department of the Tavistock in 1933, when he was active in the move from family investigation to family therapy, discussed below.

17 See the history given in Institute of Child Psychology, 1934.

18 Lowenfeld, 1935. See also the Institute of Child Psychology News Bulletin, published from 1936, and renamed Child Psychology in 1938, which devoted much of its space to discussion of the genesis of emotional difficulties and the role of play therapy.

19 Palthorpe, 1932.

20 See Glover, 1944.

21 On the growth of the Prison Psychological Service, see Richards, 1977. For an influential text produced from the ISTD, see Friedlander, 1946.

22 Board of Education, 1955, p12.

23 Loc cit.

24 This is drawn from the Annual Reports (Child Guidance Council, 1931 etc), from the Reports of Inter-Clinic Conferences, (Child Guidance Council, 1935 and 1937) and from other publications, (Child Guidance Council 1938a, 1938b). See also the contributions by the staff of the Tavistock Clinic to the volumes of Probation from 1929-1934 (National Association of Probation Officers, 1929-1934).

25 E Miller, ed, 1937. The quotes are from Miller's Introduction.

26 See the materials collected in Advances in Understanding the Child, Home and Schools Council, 1935. The Library was under the General Editorship of Kimmins. See for example Drever and Drummond, 1930.

27 See Glover, 1932 for a discussion of differing medico-psychological conceptions of normality.

28 Burt, ed, 1933. The series also included Jones on the unconscious mind.

29 Hadfield, ed, 1935.

30 Yelloly, 1980, Ch 3: 'Psychoanalysis and social work in the thirties'.

31 Timms, 1964, p48.

32 Yelloly, op cit, p58.

33 This is certainly true of the use which J C Pringle, the Secretary of the Society, made of Jung. Cf ibid, pp 58-9 and our discussion in Chapter 8 above.

34 Macadam, 1934, p104; quoted in Yelloly; op cit, pp 59-60.

35 Yelloly, op cit, p60.

36 Moodie, 1931.

37 For a description of this transformation in America, see Hardcastle, 1933, p335.

38 This memorandum is quoted in Yelloly, op cit, pp 47-48.

39 Raven, 1925.

40 Gillespie, 1933.

41 Miller, 1929, pp 12-14.

42 Cosens, 1933, p65.

43 Cf also Rees and Robinson, 1930.

44 Cf Richmond, 1917; Robinson, 1930.

45 Brown, 1939a, p41.

46 Brown, 1939b.

47 Ibid, p385.

48 See especially Burt, 1925, Chs 1 and 14 and Burt, 1929.

49 MacCalman, in Gordon, ed, 1939, p259. Things were a bit different in Scotland, where the clinics grew out of the education service - five out of the eleven Scottish clinics were directed by psychologists.

50 The lines of argument have scarcely changed. See, for example, the papers given to a British Psychological Society Symposium on Psychologists and Psychiatrists in the Child Guidance Service, held in March 1951. Kennedy, 1951 argues the medical case, Davidson, 1952 argues for a division of function and collaboration. McCallum, 1952, shows the educational origin and direction of the Scottish service and suggests that this provides the ideal opportunity for the introduction of psychologists and psychiatrists without conflict. Keir, 1952, reconstructs the history of child guidance to minimise the psychiatric input and locate its roots in biology and education, suggesting something like a medical take over of the movement in the 30s.

51 See the Annual Reports of the Child Guidance Council over this period.

52 Cf Moodie, 1931; Child Guidance Council 1935, 1937.

53 Gordon, ed, 1939.

54 Stevenson and Smith, 1934, quoted in ibid, p259.

55 See also the chapters by E Miller and Rees of the Tavistock in Culpin, 1931.

56 For these discussions see Child Guidance Council 1935, 1937 and the remarks on English psychologists made by Hardcastle in his (1933) report on the American situation.

57 Darwin, 1877; Preyer, 1894; Shinn, 1893; Sully, 1895; Claparede, 1911; Stern, 1914. The work of G Stanley Hall and Mark Baldwin, with its doctrine of recapitulation, was very influential in America - see Hall, 1904 and Baldwin, 1895. For a representative Child Study text in England, see Drummond, 1907. See also the discussion in Caws, 1949.

58 In this connection, it is significant that Jean Piaget's first psychological work was on standardising Binet's tests of intelligence. See Piaget's contribution to Boring et al, ed,

1968.

59 For early examples, see Gesell, 1925, 1928.

60 Gesell, 1925, p39ff; cf also Gesell, 1928, p409ff.

61 See the reviews in Buhler, 1931; Collins, 1939; and Earl, 1939.

62 Bridges, 1931.

63 Ibid, p3.

64 Ibid, p5.

65 Isaacs, 1933, p6.

66 Isaacs, 1931, p5.

67 Cattell, 1946, pxvii. Full references to all the American texts cited will be found in the bibliography.

68 Cattell, 1936a.

69 Galton, 1883, pp 133-146.

70 Jung, 1918.

71 Burt, 1925, p402.

72 Cf Burt, loc cit.

73 Collins, 1925, 1927.

74 But cf Vernon, 1933b.

75 Downey, 1923. cf Collins, 1923; Burt, 1925, pp 403-405; Oates, 1928; Richardson, 1929.

76 Cf Collins, 1925, Burt 1925, pp 405-413.

77 Burt, 1938; Cattell, 1933a; Oates, 1929.

78 Cattell, 1936b.Of course, Cattell went on to produce his 16 Personality Factor Test - see, for example, Cattell, 1957.

79 Earl, 1939.

80 Burt, 1925, pp 414-419.

81 Valentine, 1929.

82 Burt, 1925, p9.

83 Freud, 1928, pp184-185.

CONCLUSION

The conclusions of this study of the formation of the psychology of the individual in the period from 1870 to 1939 lie in three principal areas: methodological, historical and conceptual.

The fruits of archaeology

This study has demonstrated that archaeological techniques of investigation are fruitful in examining such an issue. It has been possible to describe the conditions of possibility for the formation of the psychology of the individual: the emergence, in a number of specific practices and institutions, of the problems which it would address; the ways in which these were brought into relationships with one another to form the objects of a scientific discourse; the theoretical conditions for the development of particular modes of conceptualisation of these objects, and the form of the explanations produced; the organisation of the psychology of the individual as a discursive practice within particular strategies and around specific objectives.

The complex description which has been produced also provides substantiation for the criticisms made, in the first two chapters of this study, of other ways of analysing the history of the human sciences and their practical consequences. It would certainly be difficult to construe the events which we have been considering in terms of a progressive and cumulative development of psychological knowledge towards the truth of its object, as proposed in the authoritative histories of psychology.

But nor would it be helpful to use the 'interest' analyses of the 'strong programme' to confer intelligibility upon these happenings. For example, an explanation of the formation of

conceptions of the nature, measurement, distribution and consequences of intelligence in terms of the interests of the participants would be partial and limited. It would fail to consider the complex political concerns and conditions which placed the problem of the feeble-minded on the social agenda for regulation in the first place, the conceptual conditions for the establishment of statistical arguments about population variation, the ways in which these became organised into particular types of explanation and strategic orientation, the different positions taken up by various forces in the field.

One cannot convincingly differentiate between the different strategies which we have identified, and which contested with one another, in terms of the class interests they represent or the class composition of their membership. Little would be understood about the nature and terms of the opposition between psycho-eugenics and neo-hygienism, for example, by reference to the class allegiance of the members of the organisations involved, or of the leading protagonists in the debates. And to explain the opposition in terms of professional interests, in the absence of any more convincing economic differentiation between them, would merely be to assume what one is setting out to explain - the existence of groups organised around differing and opposed objectives, or advocating different and opposed courses of action.

Further, to conceive of the emergence of the various strategies which we have traced in terms of deviance and social control, would be to radically oversimplify, and to sidestep the issue of how particular problems for social regulation were formed, and the specific nature, objectives and consequences of the different strategies which were promoted. The feeble-minded individual, the

hygienic mother and child, the shell-shocked soldier, the juvenile delinquent - these were not singled out for regulation on account of their 'deviance', but because of the techniques, priorities and exigencies of certain conceptions of government, certain objectives vis-a-vis the population, certain technologies of socialisation, education, adjudication and reformation.

And the strategies we have identified did not seek to 'control' deviance, but to maintain the quality of the population, prevent degeneration, produce socially beneficial habits, increase health and well-being, promote happiness and adjustment. The negative and constraining instances are merely one aspect of the range of objectives of strategies, and strategies are as much directed to the production of positive capacities - such as fitness, virtue and contentment - as they are to the elimination of undesirable conducts.

Further, to analyse the process we have been considering in terms of any general tendency towards the 'rationalisation' of social control through its allocation to 'experts' is to neglect the analysis of the conditions under which certain knowledges laid claim to expert status, the terms in which these claims were made, the reasons why some claims were not successful and others were accepted as well founded, and the particular consequences of the success of one claim rather than another. It is also to ignore the fact that the relations between experts and their subjects differ within different discursive practices. The relation between tester and child in the practice of intelligence testing differs from that between doctor and patient in 'the new psychology', between welfare worker and mother within neo-hygienism, and between worker and family in social casework.

Even worse, to reduce all this to a process of 'medicalisation' is to ignore the specificity and variability of the strategies,

objects, modes of conceptualisation and subject positions established within the different discourses and practices which have made up medicine, and the opposition and disputation between medicalising strategies and their opponents.

It would also be unhelpful to see the diversity of strategies which we have examined here as ultimately having an economic rationale. Certainly, as we have seen, issues of production and of the economy did enter into the formation of some strategies, at the level of the calculation of certain social forces and the specificaton of objectives. But many strategies were directed towards the regulation of dimensions which should not so quickly be reduced to their economic functions. The dimension of social contentment, for example, wherein lie concerns for the promotion of happiness and well-being through public tranquility and personal harmony. The dimension of the biological life of society, to which are relevant such issues as the minimising of illness, suffering and premature death and the promotion of health, welfare and physical efficiency. The dimension of ethics, of all those concerns about the morality and immorality of social and personal conduct, and the ways in which a virtuous life should be led. Perhaps one could interpret the various forces active in these fields as representing the interests of one class or another, or as serving real interests unbeknown to the participants themselves. And, no doubt, it would be possible to see strategies and objectives concerning these dimensions as merely serving functions prescribed by capital accumulation, the reproduction of labour power, the legitimation of state power and the advancement of imperialism - the highest stage of capitalism. It must be up to the reader to judge the conceptual protocols which allow such interpretations, and the extra intelligiblity which is

conferred by the reduction of these diverse aspects of social existence to the more or less direct expression of economic exigencies.

The formation of the psychology of the individual

The historical events we have traced in this study have been outlined in the Introduction, and this summary need not be repeated here. The psychology of the individual cannot be understood as the application of a psychological knowledge of normality, gained through theoretical reflection or laboratory investigation, to a domain of practical problems. On the contrary, it was through these attempts to diagnose, conceptualise and regulate pathologies of conduct that psychological knowledge and expertise first began to establish its claims for scientific credibility, professional status and social importance.

Of course, the specific concepts, theories and explanations of intelligence, personality and so forth produced within the psychology of the individual rapidly became bound up in theoretical debates which were not constrained by the exigencies of the strategies and problems within which such arguments had originally been formed. It is true that there has been an enormous development of differential psychology or psychometrics in the post war period, the proliferation of standardised measures, the use of advanced statistical techniques such as complex factor analytical procedures, the deployment of tests in education, psychiatry, industry, the criminal justice system, the prison and the army. But these techniques of measurement, standardisation and normalisation, whatever their social significance, occupy only a small, if disputatious, part of the psychological domains of cognition and personality. As we have seen in this study, the rules governing the development and transformation

of scientific discourses do not merely reflect extra-theoretical conditions; the sciences are regulated by their own norms of truth. One cannot derive the conceptual structure of contemporary psychology either from its current social existence, or from any founding moment, or initial strategy.

Hence, the events which we have been tracing here were not the origin of the modern enterprise of scientific psychology. Their role was more modest: through them, conditions were established within which a scientific discourse of psychology could begin to be enunciated: institutional sites; professional agencies; a corpus of authorised texts; systems for the organisation and dissemination of research and discussion; ways of formulating arguments; relations between psychologists and their subjects; styles of psychological experimentation and adjudication; objects and domains appropriate for psychological judgment.

Perhaps it is true that the only lasting contribution to psychological modernity which was made by the psychology of the individual in England over this period was the standardised test of intelligence. And it is also true that individual psychologists were certainly not a socially powerful instance, and their strategies met with rather limited success before the Second World War. But however short lived the specific doctrines and proposals were, and however tenuous was the toehold that the psychology of the individual gained as a professional instance within the field of social regulation, the importance of these events should not be underestimated. For what they made possible was a science of the human individual which allowed the social regulation of individuals and populations in terms of their mental attributes and capacities.

Norms of life, norms of number, and norms of social government

Much of this study has been concerned with the conception of normality around which the psychology of the individual constituted itself, and the possibilities and limitations which this established for its functioning as a socially effective clinical practice alongside medicine. We have argued that the psychology of the individual grounded itself in the belief that there was a symmetry between three registers of norms - norms of socially desirable conduct, norms of the distribution of psychological characteristics and attributes in the population, and statistical conceptions of the normal distribution of variation in large groups. This mode of conceptualisation was central both to its theory of its object - intelligence, temperament - and to its techniques of assessment and claims to diagnostic ability. In conclusion, therefore, let us consider briefly this issue of norms in relation to clinical judgments.

It is to Georges Canguilhem that we are indebted for the most illuminating discussion of the relations between the concept of norm and the sciences of life.[1] Over-simply, one could say that biology and medicine owe their modernity to the way in which they construe the specificity of their object - life. For such discourses a knowledge of life becomes possible through conceiving of life as itself a normative process. Life, in that it consists of processes which are homeostatic and self-regulating, has an inherent normativity. Thus medical and biological discourses could organise their evidence and their concepts and explanations in terms of this essential normativity of their object and its consequences for the analysis of specific phenomena. Two consequences are significant here.

Firstly, normality, and the processes of regulation which tend to return the organism to it, has a very particular status. Normality is equivalent to health, it is the state to which the organism tends by virtue of its organisation, it is its state whilst untroubled. Thus health, for the living organism, is normality and normativity; health cannot be merely a numerical value. Canguilhem is fond of quoting Leriche: health is life in the silence of the organs.

Secondly, disease is an essential problem for the sciences of life; one that, however conceived, must be understood in relation to the normativity of life itself. In relation to this normativity, and the health which is associated with it, disease is a negative value. It is dis-ease, a certain perversion of normal functioning, a disquiet of the bodily processes. But in relation to knowledge of life, disease acquires a positive value, in that the existence of the biological normal is revealed through its infraction. The normativity of the life processes makes itself evident when these are disturbed and seek to re-establish themselves. It is thus to the possibility of disease that we owe the possibility of a scientific awareness of life.

Now it is no doubt true that to derive the normativity of medical discourse and practice from the ontological normativity of its object is to take an epistemological shortcut. It is also to think internal to contemporary medical and biological knowledge. It is, of course, necessary to consider the theoretical and social conditions which made it possible to think in normative terms about health and disease, and to be able to examine the historical and cultural variability of such norms, which cannot merely be ascribed to their object. Nonetheless, Canguilhem's argument enables us to distinguish between knowledges which base their conception of norms

upon the normativity of their object, and those which derive their norms in other ways.

One important condition for the emergence of clinical medicine was undoubtedly the statisticalisation of disease - aetiology, symptomatology, prognosis - that was made possible by the hospital. But even so, one would wish to insist that a medical norm is not merely a statistical value. Medicine does not derive its concepts of its object from a calculation of average levels of functioning. Even those attributes of medical normality - signs of health or indicators of disease - most amenable to quantification have the peculiar character of a double normativity. The normal population values for such diagnostic indicators as pulse rate, temperature, blood pressure and so forth are always linked to a conception of the normal operation of the homeostatic mechanisms of the body itself. Statisticalisation, for clinical medicine, was a condition of discovery of the normativity of life, it was not its foundation.

The rules of formation of the psychology of the individual differ on almost every count. Individual psychology <u>derives</u> its conception of its object from the statistical normativity of the population. The norms which it proposes are not those of life but those of large numbers. The possibility of a knowledge of the individual, for the psychology of the individual, is not provided through a conception of the psyche, its processes, its homeostatic mechanisms, the laws of its development and the abnormalities which they can give rise to. It is founded upon a metaphysic of the quantification of qualities and the laws of variation in populations. A knowledge of the individual is possible not on account of the specificity of the psyche and its variability, but precisely because it is conceived of as non-specific. Once this variability can be

numerically specified, it differs not at all from the variability of any other quality in large groups. And indeed, on this premise are based the objects, means and techniques of quantification themselves, for those measures of qualities which do not accord with the statistical norms for variability in general can have the status only of errors to be discarded. It is more than merely metaphor which is involved in the assumption of equivalence between populations of numbers and populations of persons. It is the constitutive doctrine of the psychology of the individual.

But individual psychology requires a second level of equivalence of norms. It was founded through the identification of norm in the register of the statistical with norm in the register of the social. The operation which made individual psychology possible was the identification of statistical norms of variation with social norms of expectation. The abnormality which was so crucial in the founding of a medical notion of bodily norms was a disturbance in its object, the body itself. But the abnormality around which individual psychology was organised was not an abnormality of a life process, or one specifiable in terms of ease and dis-ease. It was an abnormality in terms of a norm of functioning specified by particular social apparatuses. The unease which enabled the normativity of individual psychology to be established was constituted by the objectives of government rather than the vicissitutes of the psyche. It was the school, the courts, the police and the army which provided the psychology of the individual with those <u>whom it would have to be able to construe as abnormal</u>.

It is true that at its inception the project of measuring intelligence, in both England and France, was linked to a theory of the intellect, and that the techniques devised were thus articulated upon such a theory. Anthropometrics did indeed seek to derive a

means of differentiation of individuals from its theory of bodily and mental energy. But the psychology of the individual only began to establish itself as a functioning discourse when it abandoned the purity of anthropome-tric measures and dirtied its hands with the requirements of educational administration. The statistical techniques developed within anthropometrics were now utilised without a detour through the abilities of the body - they were applied directly to the assessment of the degree of conformity with social expectations. The trajectory of individual psychology began with the combination of norms derived from particular conceptions of population and its regulation with norms derived from a particular conception of numbers and their variation. The normativity of the object of individual psychology was constructed by a process of extrapolation from these norms of a completely different order.

The theoretical object which is constituted by the psychology of the individual thus has to conform to a double requirement. Firstly that the variability to which it is subject conforms with the distribution which is <u>already</u> known - the judgment of school, court or whatever. Hence, as far as devices of assessment are concerned, items enter or leave the tests on the grounds of their ability to differentiate according to the norms prescribed by the social institution in question. Secondly that the distribution across the population conforms to the demands of statistical theory and the normal distribution curve. The existence of the psychology of the individual depended upon it being able to align norms from the two registers; the whole project of development and standardisation of tests seeks to carry out this task, and does so, paradoxically, in the name of scientific rigour.

Medicine can function as a clinical practice on account of the

organic relations which it establishes between its conceptions of normality and pathology. This enables it to operate as both a diagnostic and a therapeutic instance. Individual psychology, equipped with a technique but not a theory, a project but not a concept, and a notion of deviation without an account of normality, was condemned to repeat neurotically the operation which had founded it. This is so, not only in the test of intelligence, but in all those other techniques of assessment which have succeeded it since the Second World War. Hence its destiny was to become not a clinical but an administrative practice.

From its inception up until today, individual psychology, differential psychology, psychometrics, sought to extrapolate a theory of psychological functioning from a means of differentiation. No wonder the meeting between psychometrics and a theory of cognition has been repeatedly postponed. To derive a theory of normality from a conception of the normativity of a life process and the incidence of pathology is one thing. To derive a theory of normality from the normativity of a statistical average and the incidence of variations from it is another. A problem which is exacerbated if it takes place within a practice, and by means of a technique, which depends upon discarding that which individuals share and attending only to that which differentiates them. And one which is exacerbated further when what counts as abnormality is set by a norm of adaptation to the conventions of a socio-economic order. Health, for the psychology of the individual, is not so much life in the silence of the organs as life in the silence of the authorities.

NOTES TO CONCLUSION

1 Canguilhem, 1978.

BIBLIOGRAPHY

Official Publications are listed at the end.

ANON (1718) The Infant's Lawyer: or the Law (Ancient and Modern) Relating to Infants London: J. Nutt for St. John Baker.
ANON (1865) Idiot asylums. Edinburgh Review, 122, 37-74.
ABELSON, A. R. (1911) The measurement of mental ability of 'backward' children. British Journal of Psychology, 4, 268-314.
ABRAHAM, Karl (1924) Versuch einer Entwicklunggeschichte der Libido Leipzig: Internationaler Psychoanalyticher Verlag.
ABRAMS, Philip (1968) The Origins of British Sociology 1834-1914 Chicago: University of Chicago Press.
ACKERKNECHT, Erwin H. (1969) A Short History of Psychiatry (tr S Wolf) London: Hafner.
ADDISON, Paul (1977) The Road to 1945 London: Quartet.
ADLAM, Diana and ROSE, Nikolas (1981) The Politics of Psychiatry. In Politics and Power: 3 London: Routledge and Kegan Paul.
ALBUTT, T. Clifford (1892) Insanity in children. In vol. 1 of Daniel Hack Tuke, ed, A Dictionary of Psychological Medicine, 2 vols, London: Churchill.
ALDEN, Percy (1905) The Unemployed, A National Question London: King
ALLEN, G. (1976) Genetics, Eugenics and Society: internalists and externalists in contemporary history of science. Social Studies of Science, 6, 105-122.
ALLPORT, Floyd H. and ALLPORT, Gordon W. (1921) Personality traits: their classification and measurement. Journal of Abnormal and Social Psychology, 16, 6-40.
ALLPORT, Gordon W. (1937) Personality: A Psychological Interpretation New York: Holt.
ALLPORT, Gordon W. (1938) Personality: A Psychological Interpretation London: Constable.
ALTHUSSER, Louis (1970) Reading Capital (tr B. Brewster) London: New Left Books.
ARMSTRONG, David (1983) Political Anatomy of the Body Cambridge: Cambridge University Press.
ARNAULD, Antoine [1661](1964) The Art of Thinking (tr J. Dickoff and P. James) Indianapolis: Bobbs-Merrill.
ASHDOWN, Margaret and BROWN, S. Clement (1953) Social Service and Mental Health London: Routledge and Kegan Paul.
ATLEE, Clement R. (1920) The Social Worker London: G. Bell and Sons.

BACHELARD, Gaston (1951) L'activite rationaliste de la physique contemporaire Paris: PUF.
BALDWIN, James Mark (1895) Mental Development in the Child and the Race New York: Macmillan.
BALLARD, Philip B (1920) Mental Tests London: Hodder & Stoughton.
BALLARD, Philip B (1922) Group Tests of Intelligence London: Hodder & Stoughton.
BARKER, David (1982) How to curb the fertility of the Edwardian unfit. Unpublished paper given to Society for the Social History of Medicine conference on Mental Handicap, 24.4.82.
BARNES, Barry (1974) Scientific Knowledge and Sociological Theory London Routledge and Kegan Paul.

BARNES, Barry (1977) Interests and the Growth of Knowledge London: Routledge and Kegan Paul.
BARNES, Barry (1981) On the hows and whys of cultural change. Social Studies of Science, 11, 481-498.
BARNES, Barry (1982) T.S. Kuhn and Social Science London: Macmillan.
BARNES, Earl (1901) A forgotten student of child study. The Paediologist, 3, 120-123.
BARNETT, Samuel A. and BARNETT, Henrietta (1909) Towards Social Reform London: Fisher Unwin.
BARTLETT, Frederic C. (1928) Temperament and social class. Eugenics Review, 20, 25-28.
BASNETT, M. (1969) Voluntary Social Action: A History of the National Council of Social Service, 1919-1969 London: National Council of Social Service.
BATTIE, William [1758](1962) A Treatise on Madness London: Dawsons.
BAUDOUIN, Louis Charles (1924) Suggestion and Auto-suggestion (tr E. and C. Paul) London: George Allen and Unwin.
BAUMGARTEN, Franziska (1936) Character traits. British Journal of Psychology, 36, 289-298.
BEAMES, Thomas (1850) The Rookeries of London London: Bosworth.
BECCARIA BONESANA, Cesare (1804) Elementi de economia publica Milano.
BECK S. (1937) Introduction to the Rorschach Method. American Orthopsychiatric Association Monographs, No 1.
BEN-DAVID, J. (1971) The Scientist's Role in Society Englewood Cliffs, N.J.: Prentice Hall.
BENTHAM, Jeremy (1843) Principles of the civic code. In The Works of Jeremy Bentham (ed J. Bowring), vol 1. Edinburgh: William Tait.
BEVERIDGE, William H. (1905) The problem of the unemployed. Sociological Papers, 3, 324-331.
BEVERIDGE, William H. (1909) Unemployment. A Problem of Industry London: Longmans.
BHASKAR, Roy (1975) Feyerabend and Bachelard: two philosophies of science. New Left Review, 94, 31-55.
BINET, Alfred and HENRI, Victor (1895) La psychologie individuelle. L'Annee psychologique, 2, 411-465.
BINET, Alfred and SIMON, Theodule (1905a) Sur la necessite d'etablir un diagnostic scientifique des etats inferiors de l'intelligence. L'Annee psychologique, 11, 163-190.
BINET, Alfred and SIMON, Theodule (1905b) Methodes nouvelles pour le diagnostic du niveau intellectuel des anormeux. L'Annee psychologique, 11, 191-244.
BINET, Alfred and SIMON, Theodule (1908) Le developpement de l'intelligence chez les enfants. L'Annee psychologique, 14, 1-94.
BINET, Alfred and SIMON, Theodule (1909) l'intelligence des imbeciles. L'Annee psychologique, 15, 1-147.
BINET, Alfred and SIMON, Theodule [1907] 1914 Mentally Defective Children (tr W.B. Drummond) London: Edward Arnold.
BINET, Alfred and SIMON, Theodule (1916) The Development of Intelligence in Children (translation of articles from L'Annee psychologique by E.S. Kite) Baltimore: Williams and Watkins.
BINGHAM, Peregrine (1816) The Law of Infancy and Couveture London: Butterworth.
BLACKER, Carlos P. (1952) Eugenics. Galton and After London: Duckworth.
BLACKSTONE, William (1765-9) Commentaries on the Laws of England Oxford: Clarendon Press.
BLAND, Lucy (1982) 'Cleansing the Augean Stables': The V.D. Panic

of early twentieth century Britain. Unpublished paper.
BLAUG, Mark (1963) The myth of the Old Poor Law and the making of the new.' Journal of Economic History, 23, 151-184.
BLAUG, Mark (1964) The Poor Law Report re-examined. Journal of Economic History, 24, 229-245.
BLOOR, David (1976) Knowledge and Social Imagery London: Routledge and Kegan Paul.
BOLL, Theophilus E. (1962) Mary Sinclair and the Medico-Psychological Clinic of London. Proceedings of the American Philosophical Society, 106, 310-326.
BOOTH, Charles (1892) Inaugural address. Journal of the Royal Statistical Society, 60, 521-557.
BOOTH, Charles (1892-97) Life and Labour of the People in London (10 vols) London: Macmillan.
BORING, Edwin G. (1929) A History of Experimental Psychology London: Century Co.
BORING, Edwin G., LANGFELD, Herbert S., WERNER, Heinz, and YERKES, Robert M. (eds) [1952](1968) A History of Psychology in Autobiography, Vol IV New York: Russell and Russell.
BOTTOMORE, Tom and GOODE, Patrick (eds) (1978) Austro-Marxism Oxford: Oxford University Press.
BOUCHARD, Donald F. ed (1977) Language, Counter-Memory, Practice Oxford: Blackwell.
BOWLBY, John (1940) Personality and Mental Illness London: Kegan Paul.
BOWLBY, John (1944) Forty-four juvenile thieves: their characters and home lives. International Journal of Psychoanalysis, 25, 19-53 and 107-128.
BOYD, William (1914) From Locke to Montessori London: Harrap & Co.
BRADBY, Mary K. (1919) Psycho-analysis and its Place in Life London: Hodder and Stoughton.
BREMNER, R. H. (1956) Scientific philanthropy, 1873-93. Social Service Review, 30, 168-173.
BRETT, George S. (1912-1921) A History of Psychology, 3 vols., London: Allen & Co.
BRIDGELAND, M. (1971) Pioneer Work with Maladjusted Children London: Staples.
BRIDGES, Katherine Banham (1931) The Social and Emotional Development of the Pre-School Child. London: Kegan Paul, Trench, Trubner.
BRIERLEY, Susan (afterwards Isaacs) (1921) An Introduction to Psychology London: Methuen.
BRITISH MEDICAL JOURNAL (1903) National health and military service. British Medical Journal, July 25th 1903, 207-208.
BROWN, J. (1968) Charles Booth and labour colonies. Economic History Review, 21, 349-360.
BROWN, S. Clement (1939a) Family case work and mental health. Charity Organization Quarterly, 13, 40-50.
BROWN, S. Clement (1939b) The methods of social case-workers. In F.C. Bartlett, M. Ginsberg, E.J. Lingren and R.H. Thouless, eds, The Study of Society, London: Kegan Paul, Trench, Trubner and Co.
BROWN, William (1911) The Essentials of Mental Measurement London: Cambridge University Press.
BROWN, William (1913) Freud's theory of dreams. The Lancet, 19.4.1913, 1182.
BROWN, William (1921) Psychology and Psychotherapy London: Edwin Arnold.
BROWN, William (1923) Talks on Psychotherapy London: University of London Press.

BROWN, William and THOMSON, Godfrey H. (1921) The Essentials of Mental Measurement London: Cambridge University Press.
BROWNE, James Crichton (1860) Psychical diseases of early life. Journal of Mental Science, 6, 284-320.
BRUCE, Lewis C (1906) Studies in Clinical Psychiatry London: Macmillan.
BRYANT, Sophie (1886) Experiments in testing the character of schoolchildren Journal of the Royal Anthropological Institute, 15, 338-349.
BUFFON, George-Louis Leclerc, Comte de (1749) Histoire naturelle de l'homme Paris: Imprimerie Royale.
BUHLER, Charlotte (1931) The social behaviour of the child. In C. Murchison, ed Handbook of Child Psychology Worcester, Mass: Clark University Press.
BURBURY, Winifred M.; BALINT, E. M. and YAPP, B.J. (1950) An Introduction to Child Guidance London: Macmillan.
BURKE, Noel H. M. and MILLER, Emanuel (1929) Child mental hygiene - its history, methods and problems. British Journal of Medical Psychology, 9, 218-242.
BURN, John L. (1947) Recent Advances in Public Health London: Churchill.
BURNS, Charles L.C. (1933) Child guidance on the continent. British Journal of Educational Psychology, 3, 251-267.
BURROW, John W. (1966) Evolution and Society London: Cambridge University Press.
BURROWS, George (1828) Commentaries on Insanity London: Underwood.
BURT, Cyril L. (1909) Experimental tests of general intelligence. British Journal of Psychology, 3, 94-177.
BURT, Cyril L. (1911) Experimental tests and their relation to general intelligence. Journal of Experimental Pedagogy, 1, 93-112.
BURT, Cyril L. (1914) The measurement of intelligence by the Binet tests. Eugenics Review, 6, 36-50 and 140-152.
BURT, Cyril L. (1915) General and specific factors underlying the primary emotions. Manchester: British Association.
BURT, Cyril L. (1917) The unstable child. Child Study, 10, 3, 61-79.
BURT, Cyril L. (1918) Individual psychology and social work. Charity Organisation Quarterly, 43, 4-19 and 51-60.
BURT, Cyril L. (1921) Mental and Scholastic Tests London: London County Council.
BURT, Cyril L. (1923a) The causal factors of juvenile crime. British Journal of Medical Psychology, 3, 1-33.
BURT, Cyril L. (1923b) Delinquency and mental defect. British Journal of Medical Psychology, 3, 168-178.
BURT, Cyril L. (1925) The Young Delinquent (The Sub-Normal School Child, vol. 1) London: University of London Press.
BURT, Cyril L. (1927) The Measurement of Mental Capacities The Henderson Trust Lecture, No VII. Edinburgh: Oliver and Boyd.
BURT, Cyril L. (1929) The psychological clinic. Howard Journal, 2, 290-294.
BURT, Cyril L. (1938) The analysis of temperament. British Journal of Medical Psychology, 17, 158-188.
BURT, Cyril L. (1949) Recent discussions of juvenile delinquency. British Journal of Educational Psychology, 19, 32-43.
BURT, Cyril L. (1955) The historical development of the guidance movement in education - England. In The Year Book of Education, 1955, ed R. K. Hall and J. A. Lauwerys, London: Evans.
BURT, Cyril L. [1952] (1968) Cyril Burt. In E. Boring, H Langfield, H Werner and R Yerkes, eds, A History of Psychology in

Autobiography, Vol IV New York: Russell & Russell.
BURT, Cyril L. et al. (1926) A Study in Vocational Guidance Industrial Fatigue Research Board Report No 33. London: HMSO.
BURT, Cyril L. (1933) How the Mind Works London: George Allen and Unwin.
BUSS, A. (1976) Galton and the birth of differential psychology and eugenics: social, political and economic forces. Journal of the History of the Behavioural Sciences, 12, 47-59.

CAMERON, Hector C. (1919) The Nervous Child London: Oxford University Press.
CAMERON, Hector C. (1955) The British Paediatric Association, 1928-1952 London: British Paediatric Association.
CANGUILHEM, Georges (1968) Etudes d'histoire et de philosophie des sciences Paris: Vrin.
CANGUILHEM, Georges (1977) Ideologie et rationalite Paris: Vrin.
CANGUILHEM, Georges [1943, 1963-6] (1978) On the Normal and the Pathological (tr Carolyn Fawcett) Dordrecht: Reidel.
CANGUILHEM, Georges (1980) What is psychology? (tr H. Davies) I & C, 7, 37-50.
CANTOR, G.N. and SHAPIN, S. (1975) Phrenology in the early nineteenth-century Edinburgh: an historiographic discussion. Annals of Science, 32, 195-256.
CARPENTER, Mary (1851) Reformatory Schools for the Children of the Perishing and Dangerous Classes, and for Juvenile Offenders London: Gilpin.
CARPENTER, William B. (1842) Principles of Human Physiology London: Churchill.
CASSIRER, Ernst (1951) The Philosophy of the Enlightenment (tr F. Koelln and J. Pettigrove) Princeton, New Jersey: Princeton University Press.
CATTELL, James McKeen (1890) Mental tests and measurements (followed by some remarks by F. Galton). Mind, 15, 373-380.
CATTELL, James McKeen and BRYANT, Sophie (1889) Mental association investigated by experiment. Mind, 14, 230-250.
CATTELL, James McKeen and FARAND, L. (1896) Physical and mental measurements of the students of Columbia University. Psychological Review, 3, 618-648.
CATTELL, Raymond B. (1933a) Temperamental tests: 1. Temperament. British Journal of Psychology, 23, 308-329.
CATTELL, Raymond B. (1933b) Temperamental tests. 2. Tests. British Journal of Psychology, 24, 20-49.
CATTELL, Raymond B. (1936a) A Guide to Mental Testing for Psychological Clinics, Schools and Industrial Psychologists London: University of London Press.
CATTELL, Raymond B. (1936b) Temperament tests in clinical practice. British Journal of Medical Psychology, 16, 43-62.
CATTELL, Raymond B. (1946) Description and Measurement of Personality London: Harrap.
CATTELL, Raymond B. (1957) Personality and Motivation Structure and Measurement New York: Harcourt, Brace and World.
CAWS, A. G. (1949) Child study fifty years ago. Bulletin of the British Psychological Society,1, 3, 104-109.
CHARLES, Enid (1934) The Twilight of Parenthood London: Watts.
CHADWICK, Edwin [1842](1965) Report on the Sanitary Conditions of the Labouring Population of Great Britain (ed M.W. Flynn) Edinburgh: Edinburgh University Press.

CHAMBERLAIN, Joseph (1903) Imperial Union and Tarrif Reform London: Grant Richards.
CHARITY ORGANIZATION SOCIETY (1877) Report of a Special Committee on the Education and Care of Idiots, Imbeciles and Harmless Lunatics and Report of a Deputation on the Subject to the President of the Local Government Board. London: Longmans, Green & Co.
CHARITY ORGANIZATION SOCIETY (1893) The Feeble-minded Child and Adult London.
CHESELDON, William (1728a) An account of some observations made by a Young Gentleman, who was born blind, or lost his sight so early, that he had no rememberance of ever having seen, and was couch'd between 13 and 14 Years of age. Philosophical Transactions, 35, 447-450.
CHESELDON, William (1728b) Explanation of the Instruments used, in a new operation on the Eyes. Philosophical Transactions, 35, 451-452.
CHILD, Josiah (1690) Discourse about Trade London: Sowie.
CHILD GUIDANCE COUNCIL (1931)(1932 etc) Annual Report for 1931 (1932 etc) London: Child Guidance Council.
CHILD GUIDANCE COUNCIL (1935) Report of the Inter Clinic Conference London: Child Guidance Council.
CHILD GUIDANCE COUNCIL (1937) Proceedings of the Inter-Clinic Conference of Great Britain, 1937, London: Child Guidance Council.
CHILD GUIDANCE COUNCIL (1938a) What is Child Guidance? London: Child Guidance Council.
CHILD GUIDANCE COUNCIL (1938b) Young Offenders and the Courts London: Child Guidance Council.
CLAPAREDE, E. (1911) Experimental Pedagogy and the Psychology of the Child New York: Longmans Green.
CLARE, Anthony (1980) Psychiatry in Dissent(2nd ed) London: Tavistock.
CLOUSTON, Thomas S. (1892) Developmental insanities and psychoses... the insanities of puberty and adolescence. In vol. 1 of Daniel Hack Tuke, ed, A Dictionary of Psychological Medicine, 2 vols, London: Churchill.
COATS, A. W. (1960) Economic thought and poor law policy in the eighteenth century. Economic History Review, 2nd series, 13.
COHN, Hernamm L. [1883](1886) The Hygiene of the Eye in Schools (tr W.P. Turnbull) London: Simpkin, Marshall and Co.
COLQUHOUN, Patrick (1797) A Treatise on the Police of the Metropolis (5th edn) London: Dilly.
COLQUHOUN, Patrick (1800) A Treatise on the Police of the Metropolis (6th edn) London: Mawman.
COLQUHOUN, Patirck (1806) A Treatise on Indigence London: Hatchard.
COLE, Robert H. (1913) Mental Diseases London: University of London Press.
COLLINS, Mary (1925) Character and temperament tests. British Journal Psychology, 16, 89-99.
COLLINS, Mary (1927) British norms for the Pressey Cross-Out Test. British Journal of Psychology, 18, 121-133.
COLLINS, Mary (1939) Modern trends in child psychology. In F.C. Bartlett et al, eds, The Study of Society, London: Kegan Paul, Trench, Trubner.
COMBE, Andrew (1831) Observations on Mental Derangement Edinburgh: John Anderson.
CONDILLAC, Etienne Bonnot Abbe de [1746](1971) Essay on the Origin of Human Knowledge (reprinted from the 1756 translation of Essai sur les origines des connaissances humaines by T. Nugent) Gainsville, Florida: Scholars Facsimiles.
CONDILLAC, Etienne Bonnot Abbe de [1754](1930) Treatise on the Sensations (tr of Traite des sensations, by G. Carr). London: Favil

Press.
CONDILLAC, Etienne Bonnot Abbe de (n.d.) Principes de la grammaire Francoise Nantes: Busseuil.
CONDILLAC, Etienne Bonnot Abbe de (1771) Traite des systemes Amsterdam et Leipsick.
CONDILLAC, Etienne Bonnot Abbe de (1775) Cours d'etude par l'instruction du prince de Parme Parme: Imprimerie Royale.
CONDILLAC, Etienne Bonnot Abbe de [1780](1809) The Logic of Condillac (tr of La Logique, by Joseph Neef). Philadelphia .
CONRAD, Peter (1981) On the medicalisation of deviance and social control. In D. Ingleby, ed, Child Psychiatry London: Penguin.
CONRAD, Peter and SCHNEIDER, Joseph (1980) Deviance: From Badness to Sickness St. Louis: Mosby.
COOTER, Roger (1981) Phrenology and British Alienists. In A.T. Scull, ed, Mad-Houses, Mad-Doctors and Madmen London: Athlone.
COSENS, Marjorie (1933) Psychology and social casework. Charity Organization Quarterly, 7, 63-73.
COWAN, Ruth S. (1972) Francis Galton's statistical ideas: the influence of eugenics. Isis, 63, 509-528.
COWAN, Ruth S. (1977) Nature and nurture: the interplay of biology and politics in the work of Francis Galton. Studies in History of Biology, 1, 133-208.
COWARD, Rosalind (1983) Patriarchal Precedents London: Routledge and Kegan Paul.
COWARD, Rosalind and ELLIS, John (1977) Language and Materialism London: Routledge and Kegan Paul.
CRAIG, Maurice (1905) Psychological Medicine London: Churchill.
CRANEFIELD, P. (1961) A seventeenth-century view of mental deficiency and schizophrenia - Thomas Willis on stupidity or foolishness. Bulletin of the History of Medicine, 35, 291-316.
CRANEFIELD, Paul F. (1962) The discovery of cretinism. Bulletin of the History of Medicine, 36, 489-511.
CRANEFIELD, Paul F. and FEDERN, Walter (1967) The begatting of fools, translation of Paracelsus, De Generatione Stultorum, with annotated discussion, Bulletin of the History of Medicine, 41, 56-74 and 161-174.
CRICHTON, Alexander (1798) An inquiry into the nature and origins of mental derangement (2 vols) London: Davies.
CRITCHLEY, Thomas A. (1967) A History of Police in England and Wales, 1900-1966 London: Constable.
CROWLEY, Ralph H. (1910) The Hygiene of School Life London: Methuen.
CROWLEY, Ralph H. (1928) Child Guidance Clinics, with Special Reference to the American Experience London: Child Guidance Council.
CULLEN, Michael J. (1975) The Statistical Movement in Early Victorian Britain Hassocks, Sussex: Harvester.
CULPIN, Millais (1931) Recent Advances in the Study of the Psychoneuroses London: Churchill.
CULVERWELL, Edward, P. (1913) The Montessori Principles and Practice London: Bell.
CUTLER, Tony, HINDESS, Barry, HIRST, Paul and HUSSEIN, Athar (1977) Marx's Capital and Capitalism Today, vol 1. London: Routledge and Kegan Paul.

DARWIN, Charles [1859](1968) The Origin of Species Harmondsworth: Penguin.
DARWIN, Charles (1868) The Variations of Animals and Plants under

Domestication London: John Murray.
DARWIN, Charles (1877) Biographical sketch of an infant. Mind, 2, 285-294.
DAVEY, Herbert (1913) The Law Relating to the Mentally Defective London: Stevens and Sons.
DAVIDSON, Mary (1952) The relation between psychologists and psychiatrists in the service of maladjusted adults and children. British Journal of Educational Psychology, 22, 1-4.
DEACON, A. (1976) In Search of the Scrounger: the Administration of Unemployment Benefit in Britain, 1920-1931 London: Bell.
DERRIDA, Jacques (1976) Of Grammatology (tr G. C. Spivak) Baltimore: Johns Hopkins Press.
DICEY, Albert V. (1905) Lectures on the Relation between Law and Public Opinion in England during the Nineteenth Century London: Macmillan.
DICKS, Henry V. (1970) Fifty Years of the Tavistock Clinic London: Routledge and Kegan Paul.
DIDEROT, Denis (1857) A Letter upon the Blind (tr C.S. Howe) Boston: Perkin's Institution for the Blind.
DIDEROT, Denis (1895-1877) Oevres completes Paris.
DOLLARD, John et al (1939) Frustration and Aggression New Haven: Yale University Press.
DONAJGRODZKI, Anthony P. (ed) (1977) Social Control in Nineteenth Century Britain London: Croom Helm.
DONNELLY, Michael J. (1977) Perceptions of lunacy in early nineteenth century Britain. Unpublished PhD Thesis, London University.
DONZELOT, Jacques [1977] (1979) The Policing of Families (tr Robert Hurley) London: Hutchinson.
DOWNEY, June (1919) The Will Profile: a tentative scale for measurement of the volitional pattern Laramie, Wyoming: University of Wyoming.
DOWNEY, June E. (1923) The Will-Temperament and its Testing London: Harrap.
DOYAL, Lesley (with PENNELL, Imogen) (1979) The Political Economy of Health London: Pluto.
DREVER, James and DRUMMOND, Margret (1930) The Psychology of the Pre-School Child London: Partridge.
DRUMMOND, William B. (1907) An Introduction to Child Study London: Edward Arnold.
DUKES, Clement (1887) Health at School London: Casswell.
DUNCAN, Peter M. and MILLARD, William (1866) A Manual for the Classification, Training and Education of the Feeble-Minded, Imbecile and Idiotic London: Longman.
DYOS, H. J. (1957) Urban transformation: a note on the objects of street improvement in Regency and Early Victorian London. International Review of Social History, 11, 259-265.

EARL, C. J. C. (1939) Some methods of assessing temperament and personality. In F.C. Bartlett et al, eds, The Study of Society London: Kegan Paul, Trench, Trubner.
EAST, W. Norwood (1923) Delinquency and mental defect. British Journal of Medical Psychology, 3, 153-167.
ELIAS, Norbert [1939](1978) The Civilizing Process: The History of Manners (tr Edmund Jephcott) Oxford: Blackwell.
ELLENBERGER, Henri F. (1970) The Discovery of the Unconscious: the History and Evolution of Dynamic Psychiatry New York: Basic Books.

EPEE, Charles M., Abbe de l' [1784](1801) The Method of Educating the Deaf and Dumb Confirmed by Long Experience (tr F. Green) London: G. Cooke.
ESQUIROL, Jean E. D. [1818](1845) Mental Maladies (tr E. K. Hunt) Philadelphia.
EYLER, John M. (1973a) William Farr on the cholera: the sanitarian's disease theory and the staticians method. Journal of the History of Medicine and Allied Sciences 28, 79-100.
EYLER, John M. (1973b) Mortality statistics and Victorian health policy: programme and criticism. Bulletin of the History of Medicine, 50, 335-355.
EYLER, John M. (1979) Victorian Social Medicine: The Ideas and Methods of William Farr Baltimore: Johns Hopkins University Press.

FARRALL, Lyndsay A. (1975) Controversy and conflict in science: a case study - the English Biometric School and Mendel's laws. Social Studies of Science, 5, 269-301.
FAIRFIELD, L. D. (1928) Child Guidance in America London: London County Council.
FECHNER, Gustav [1860](1966) Elements of Psychophysics, vol 1. (tr H. E. Adler) New York: Holt, Rinehart and Winston.
FEVERSHAM COMMITTEE (1939) Report on the Voluntry Mental Health Services London: Feversham Committee.
FLUGEL, John C. (1921) The Psychoanalytic Study of the Family London: Hogarth Press.
FLUGEL, John C. (1933) A Hundred Years of Psychology, 1833-1933 London: Duckworth.
FORRESTER, John (1980) Michel Foucault and the history of psychoanalysis. History of Science, 18, 286-303.
FOUCAULT, Michel [1961](1967) Madness and Civilization (tr Richard Howard) London: Tavistock.
FOUCAULT, Michel [1966](1970) The Order of Things (tr Alan Sheridan) London: Tavistock.
FOUCAULT, Michel [1969](1972) The Archaeology of Knowledge (tr Alan Sheridan Smith London: Tavistock.
FOUCAULT, Michel [1971](1972) Orders of discourse (tr Richard Swyer) Social Science Information, 10, 7-30.
FOUCAULT, Michel [1963](1973) The Birth of the Clinic (tr Alan Sheridan) London: Tavistock.
FOUCAULT, Michel [1954](1976) Mental Illness and Psychology (tr Alan Sheridan) New York: Harper and Row.
FOUCAULT, Michel [1975](1977a) Discipline and Punish (tr Alan Sheridan) London: Allen Lane.
FOUCAULT, Michel [1971](1977b) Nietzsche, genealogy, history (tr Donald Bouchard) in Donald F. Bouchard, ed, Language, Counter-Memory, Practice, Oxford: Blackwell.
FOUCAULT, Michel (1978) Politics and the analysis of discourse (tr Colin Gordon) Ideology and Consciousness, 3, 7-26.
FOUCAULT, Michel, ed [1973](1978) I, Pierre Riviere,.. Harmondsworth: Penguin.
FOUCAULT, Michel [1976](1979a) The History of Sexuality, Vol 1. (tr Robert Hurley) London: Allen Lane.
FOUCAULT, Michel (1979b) On governmentality. Ideology and Consciousness, 6, 5-21.
FOUCAULT, Michel [1977](1980) Truth and power (tr Colin Gordon). In Colin Gordon, ed, Power/Knowledge, Brighton: Harvester.
FOUCAULT, Michel (1982) The subject and power. Afterword to H. L. Dreyfus and P. Rabinow Michel Foucault: Beyond Structuralism and

Hermeneutics Brighton: Harvester.
FOX, Lionel W. (1952) The English Prison and Borstal Systems London: Routledge and Kegan Paul.
FRASER, Dereck (ed) (1976) The New Poor Law in the Nineteenth Century London: Macmillan.
FRAZER, William M. (1950) The History of English Public Health 1834-1939 London: Bailliere, Tindall & Cox.
FREUD, Anna (1928) Introduction to the Techniques of Child Analysis (tr L. P. Clark) New York: Nervous and Mental Diseases Publishing Co.
FREUD, Sigmund (1909) Selected Papers on Hysteria (tr A. A. Brill) New York: Journal of Nervous and Mental Diseases Publishing Co.
FREUD, Sigmund (1910) Three Contributions to the Sexual Theory (tr A. A. Brill) New York: Journal of Nervous and Mental Diseases Publishing Co.
FREUD, Sigmund (1913) The Interpretation of Dreams (tr A. A. Brill) London: George Allen.
FREUD, Sigmund (1914) The Psychopathology of Everyday Life (tr A. A. Brill) London: Fisher Unwin.
FREUD, Sigmund (1920) A General Introduction to Psychoanalysis (tr A. A. Brill) New York: Boni and Liveright.
FREUD, Sigmund (1922) Introductory Lectures on Psycho-analysis (tr J Riviere) London: Allen and Unwin.
FREUD, Sigmund (1927) The Problem of Lay Analysis (tr A. P. Maerker-Brandon) London: Brentano's.
FREUDENTHAL, G. (1979) How strong is Dr. Bloor's strong programme? Studies in the History and Philosophy of Science, 10, 67-83.
FRIEDLANDER, Kate (1946) A Psychoanalytic Approach to Juvenile Delinquency London: Kegan Paul, Trench, Trubner.
FROGGART, P. and NEVIN, N.C. (1971) The "Law of Ancestral Heredity" and the Medelian-Ancestrian controversy in England, 1889-1906. Journal of Medical Genetics, 8, 1-36.
FRY, Edward et al (1909) The Problem of the Feeble-Minded: an abstract of the Report of the Royal Commission with an introduction by Sir E. Fry.
FRY, Margery (1924) A Belgian psychological laboratory. Howard Journal, 1, 121-129.
FYNNE, Robert J. (1924) Montessori and her Inspirers London: Longmans & Co.

GAINER, Bernard (1972) The Alien Invasion: The Origins of the Aliens Act of 1905 London: Heinemann.
GALL, Franz J. and SPURZHEIM J. C. (1810) Anatomie et physiologie du systeme nerveau en general et du cerveau en particulaire Paris.
GALL, Franz J. (1835) On the Functions of the Brain and Each of its Parts (tr W. Lewis) Boston: Marsh, Capen and Lyon.
GALTON, Francis (1865) Hereditary talent and character. Macmillan's Magazine, 12, 157-166 and 318-327.
GALTON, Francis (1869) Hereditary Genius: an enquiry into its laws and consequences. London: Macmillan.
GALTON, Francis (1883) Inquiries into Human Faculty and its Development London: Macmillan.
GALTON, Francis (1889) Natural Inheritance London: Macmillan.
GALTON, Francis (1891) Retrospect of the work of the Anthropometric Laboratory. Journal of the Anthropological Institute, 21, 32-35.
GALTON, Francis (1901) The possible improvement of the human breed under the existing conditions of law and sentiment. (Second Huxley Lecture of the Anthropological Institute, delivered 29.10.1901)

Nature, 64, 1670, 659-665 (Oct. 31. 1901).
GALTON, Francis (1907) Probability, the Foundation of Eugenics: The Herbert Spencer Lecture. Oxford: Clarendon Press.
GALTON, Francis [1892](1962) Hereditary Genius (reprint of second Edition). London: Fontana.
GARRISON, Fielding H. (1929) An Introduction to the History of Medicine Philadelphia: Saunders.
GARRISON, Fielding H. and APT, Arthur F. (1965) Apt-Garrison History of Pediatrics Philadelphia: Saunders.
GARTNER, Lloyd P. (1960) The Jewish Immigrant in England, 1870-1914 London: George Allen and Unwin.
GAUKROGER, Stephen (1976) Bachelard and the problem of epistemological analysis. Studies in History and Philosophy of Science, 7, 189-244.
GAUKROGER, Stephen (1979) Explanatory Structures Hassocks, Sussex: Harvester.
GENIL-PERRIN, Georges (1913) Histoire des Origines et de l'evolution de l'idee de degenerescence en medecine mentale Paris.
GESSELL, Arnold (1925) The Mental Growth of the Pre-School Child New York: Macmillan.
GESSELL, Arnold (1928) Infancy and Human Growth New York: Macmillan.
GILBERT, Bentley B. (1966) The Evolution of National Insurance in Great Britain: The Origins of the Welfare State London: Joseph.
GILLESPIE, Robert D. (1933) Psychiatric social work. Charity Organization Quarterly, 7, 108-114.
GLASS, David V. (1978) Numbering the People London: Gordon and Cremonesi.
GLOVER, Edward (1932) Medico-psychological aspects of normality. British Journal of Psychology, 23, 152-166.
GLOVER, Edward (1944) The Diagnosis and Treatment of Delinquency, Clinical Report on the Work of the ISTD, 1937-41 London: Institute for the Study and Treatment of Delinquency.
GORDON, Colin (1979) Other Inquisitions. Ideology and Consciousness, 6, 23-46.
GORDON, Colin (ed)(1980) Power/Knowledge Brighton: Harvester.
GORDON, Hugh (1923) Mental and Scholastic Tests among Retarded Children Education Pamphlet No. 44. London: Board of Education.
GORDON, Ronald G. (1926) Personality London: Kegan Paul.
GORDON, Ronald G. (1939) A Survey of Child Psychiatry London: Child Guidance Council.
GORING, Charles (1913) The English Convict London: HMSO.
GRIFFITHS, Ruth (1935) A Study of Imagination in Early Childhood and its Function in Mental Development London: Kegan Paul.
GUY, William A. (1873) Inaugural address, Journal of the Statistical Society, 36, 467-485.

HACKING, Ian (1975) Why Does Language Matter to Philosophy Cambridge: Cambridge University Press.
HADFIELD, James A. (1923) Psychology and Morals London: Methuen.
HADFIELD, John A. (ed) (1935) Psychology and Modern Problems London: University of London Press.
HAFFTER, C. (1968) The changeling: history and psychodynamics of attitudes to handicapped children in European folklore. Journal of the History of Behavioural Sciences, 4, 55-56.
HALL, G. Stanley (1904) Adolescence New York: Appleton.
HALL, William Clarke (1917) The State and the Child London: New Commonwealth Books.

HALL, William Clarke (1926) Children's Courts London: George Allen and Unwin.
HALL, William Clarke and PRETTY, Arnold (1908) The Children Act, 1908 London: Stevens.
HALL, William Clarke and MORRISON, A.C.L. (1934) The Law Relating to Children and Young Persons London: Butterworth.
HALLIDAY, R. J. (1971) Social Darwinism: a definition. Victorian Studies, 14, 389-405.
HARDCASTLE, D. N. (1933) The child guidance clinic in America: its condition and future development. British Journal of Psychology (Medical Section), 13, 328-353.
HARRIS, Jose (1972) Unemployment and Politics: a Study in English Social Policy London: Oxford University Press.
HARRISON, Rachel and MORT, Frank (1977) Patriarchal aspects of nineteenth century state formation. In P. Corrigan, ed, Capitalism, State Formation and Marxist Theory, London: Quartet.
HART, Bernard (1912) The Psychology of Insanity Cambridge: University Press.
HARWOOD, J. (1976) The race-intelligence controversy: a sociological approach. I - professional factors. Social Studies of Science, 6, 369-394.
HASLAM, John F. C. (1930) Recent Advances in Preventive Medicine London: Churchill.
HAY, Douglas (1975) Property, authority and the criminal law. In D. Hay, P. Linebaugh, J. Rule, E. Thompson and C. Winslow, eds, Albion's Fatal Tree London: Allen Lane.
HEALY, William (1915) The Individual Delinquent Boston: Little Brown.
HEALY, William (1919) Mental Conflicts and Misconduct London: Kegan Paul, Trench, Trubner.
HEARNSHAW, Leslie S. (1964) A Short History of British Psychology 1840-1940 London: Methuen.
HEARNSHAW, Leslie S. (1979) Cyril Burt, Psychologist London: Hodder and Stoughton.
HENDERSON, David K. and GILLESPIE, Robert D. (1927) A Textbook of Psychiatry (1st edition) London: Oxford University Press.
HENDERSON, David K. and GILLESPIE, Robert D. (1932) A Textbook of Psychiatry (3rd edition) London: Oxford University Press.
HERD, Henry (1930) The Diagnosis of Mental Deficiency London: Hodder and Stoughton.
HERON, David (1906) On the Relation of Fertility in Men to Social Status Drapers' Company Research Memoirs. Studies in National Deterioration 1. London: Dulau and Co.
HERRNSTEIN, Richard J. and BORING, Edwin G. (1965) A Source Book in the History of Psychology Cambridge, Mass: Harvard University Press.
HILL, Hibbert W. (1916) The New Public Health New York: Macmillan.
HILL, Matthew Davenport (1857) Suggestions for the Repression of Crime London.
HILLIARD, Leslie T and KIRMAN, Brian H. (1957) Mental Deficiency London: Churchill.
HILTS, V. (1973) Statistics and social science. In R. N. Giere and R. S. Westfall, eds, Foundations of the Scientific Method: the Nineteenth Century Bloomington: University of Indiana Press.
HINDESS, Barry (1982) Power, interests and the outcomes of struggles. Unpublished paper.
HIRST, Paul (1979) On Law and Ideology London: Macmillan.
HIRST, Paul and WOOLLEY, Penny (1982) Social Relations and Human Attributes London: Routledge and Kegan Paul.
HOBSBAWM, Eric J. (1969) Industry and Empire Harmondsworth: Penguin.

HOBSON, John A. (1891) Problems of Poverty London: Methuen.
HOBSON, John A. (1902) Imperialism: A Study London: James Nisbet.
HODGKINSON, Ruth G. (1967) The Origins of the National Health Service: The Medical Services of the New Poor Laws 1834-1871 London: Wellcome Historical Medical Library.
HODGKINSON, Ruth G. (1968) Social medicine and the growth of statistical information. In Medicine and Science in the 1860's London: Wellcome Institute of the History of Medicine.
HOLCOMBE, Lee (1977) Victorian wives and property reform. In M. Vicinus, ed, A Widening Sphere Bloomingfield, Indiana: Indiana University Press.
HOLLAND, Eardley, JEWSBURY, R. C. and SHELDON, Wilfred (1933) A Doctor to a Mother London: Edward Arnold.
HOLLIS, Martin and LUKES, Stephen (eds)(1982) Rationality and Relativism Oxford: Blackwell.
HOLMAN, Henry (1914) Seguin and His Physiological Method of Education London: Pitman.
HOLT, Edwin B. (1915) The Freudian Wish and its Place in Ethics New York: Holt.
HOME AND SCHOOL COUNCIL OF GREAT BRITAIN (1935) Advances in Understanding the Child London: Home and Schools Council.
HORSFALL, Thomas C. (1905) The Relation of National Service to the Welfare of the Community Manchester: Sherratt and Hughes.
HOSPITAL ALMONERS' ASSOCIATION (1931) The Hospital Almoner np: Hospital Almoners' Association.
HOWE, Samuel G. (1848) The Causes of Idiocy Edinburgh: Maclachlan and Stewart.
HUG-HELLMUTH, Hermione von (1921) On the technique of child analysis (tr R. Gabler and B. Low). International Journal of Psychoanalysis, 2, 287-305.
HUNTER, Richard and MACALPINE, Ida (1963) Three Hundred Years of Psychiatry London: Oxford University Press.

IGNATIEFF, Michael (1979) A Just Measure of Pain London: Macmillan.
INGLEBY, David (ed) (1981) Critical Psychiatry London: Penguin.
INSTITUTE OF CHILD PSYCHOLOGY (1934)(1935 etc) Annual Report for the Year 1933 (1934 etc) London: Institute of Child Psychology.
IRELAND, William W. (1877) On Idiocy and Imbecility London.
IRELAND, William W. (1898) Affections of Children, Idiocy, Imbecility and Insanity London: Churchill.
IRVINE, Elizabeth F. (1963) A Pioneer of the New Psychology: Hugh Crichton-Miller Chatham: Ward J. Mackay.
ISAACS, Susan (1928) The mental hygiene of the pre-school child. British Journal of Medical Psychology, 8, 186-193.
ISAACS, Susan (1929) The Nursery Years London: Routledge.
ISAACS, Susan (1930) Intellectual Growth in Young Children London: Routledge.
ISAACS, Susan (1933) Social Development in Young Children London: Routledge.
ISAACS, Susan (1935) The Psychological Aspects of Child Development London: Evans.
ISAACS, Susan (ed) (1935) Concerning Children London: University of London Institute of Education and Home and Schools Council.
ISAACS, Susan (1937) The Educational Guidance of the School Child London: Evans.
ITARD, Jean [1799, 1806](1972) The Wild Boy of Aveyron, (tr E. Fawcett, P. Ayrton and J. White) London: New Left Books.

JACOB, Francois (1974) The Logic of Living Systems. A History of Heredity (tr B. Spillmann) London: Allen Lane.
JARRETT, Mary (1919) The psychiatric thread running through all social work. Mental Hygiene, 3, 210-219.
JEFFRY, C. R. (1968) The development of crime in early English society. In W. R. Chambliss, ed, Crime and the Legal Process, New York: McGraw Hill.
JOHNSON, Richard (1970) Educational policy and social control in early Victorian England. Past and Present, 49, 96-119.
JONES, Caroline (1977) Immigration and Social Policy in Britain London: Tavistock.
JONES, Ernest (1913) Papers on Psychoanalysis (1st edition) London: Bailliere, Tindall and Cox.
JONES, Ernest (1923) Papers on Psychoanalysis (3rd edition) London: Balliere, Tindall and Cox.
JONES, Ernest (1959) Free Associations London: Hogarth Press.
JONES, Ernest (1945) Reminiscent notes on the early history of psychoanalysis in English speaking countries. International Journal of Psychoanalysis, 26, 8-10.
JONES, Ernest (1957) Sigmund Freud, Life and Work Vol. 3. London: Hogarth Press.
JONES, Gareth Stedman (1976) Outcast London Harmondsworth: Penguin.
JONES, Karen and WILLIAMSON, Kevin (1979) The birth of the schoolroom. Ideology and Consciousness, 6, 59-110.
JONES, Kathleen (1972) A History of the Mental Health Services London: Routledge and Kegan Paul.
JUNG, Carl G. (1918) Studies in Word Association (tr M. D. Eder) London: Heinemann.
JUNG, Carl G. [1921](1923) Psychological Types (tr H.G. Baynes) New York: Harcourt, Brace, Jovanovich.

KAMIN, Leon J. (1977) The Science and Politics of IQ Harmondsworth: Penguin.
KANNER, Leo (1964) A History of the Care and Study of the Mentally Retarded Illinois: C. C. Thomas.
KANNER, L. (1967) Medicine in the history of mental retardation, 1800-1965. American Journal of Mental Deficiency, 72, 165-170.
KEIR, Gertrude (1952) A history of child guidance (with the assistance of Sir Cyril Burt and other members of the British Psychological Society) British Journal of Educational Psychology, 22, 5-29.
KELLOGG, Winthrop N. and KELLOGG, Luella A. (1933) The Ape and the Child New York: McGraw Hill.
KELLY, Edmond (1907) The Unemployables London: King.
KENDREW, EMILY N. (1930) A further attempt to measure the strength of instincts. British Journal of Psychology, 21, 160-174.
KENNEDY, Alexander (1951) Psychologists and psychiatrists and their general relationship. British Journal of Educational Psychology, 21, 167-171.
KERR, James (1926) The Fundamentals of School Health London: George Allen and Unwin.
KIMMINS, Charles W. (ed) (1927) The Mental and Physical Welfare of the Child London: Partridge.
KLEIN, Melanie (1923) The role of the school in the libidinal development of the child. International Journal of Psycho-Analysis,

5, 312-331.
KLEIN, Melanie (1926) The psychological principles of infant analysis. International Journal of Psychoanalysis, 8, 25-37.
KLEIN, Melanie (1932) The Psychoanalysis of Children (tr Alix Strachey) London: Woolf & Institute of Psycho-analysis.
KRAEPELIN, Emil [1917](1962) One Hundred Years of Psychiatry (tr W. Baskin) London: Peter Owen.
KRAFT, Ivor (1961) Edward Seguin and the 19th century moral treatment of idiots. Bulletin of the History of Medicine, 35, 393-418.
KRETSCHMER, Ernst [1921](1925) Physique and Character (tr W.H.J. Sprott) New York: Harcourt, Brace, Jovanovich.
KRETSCHMER, Ernst (1936) Physique and Character (tr W. J. H. Sprott) London: Kegan Paul.
KUHN, Thomas (1970) The Structure of Scientific Revolutions (2nd ed) Chicago: Chicago University Press.

LAKATOS, Imre (1971) History of science and its rational reconstruction. In R. Buck and R. S. Cohen, PSA 1970: In Memory of Rudolph Carnap, Dordrecht: Reidel.
LANE, Harlan (1977) The Wild Boy of Aveyron London: George Allen and Unwin.
LAPAGE, C. Paget (1920) Feeblemindedness in Children of School Age (with an appendix on the colony at Sandlebridge by Mary Dendy) Manchester: Manchester University Press.
LAURIE, Arthur P. (ed) (1911) The Teacher's Encyclopaedia, Vol. IV London: Caxton.
LECOURT, Dominique [1969, 1972](1975) Marxism and Epistemology: Bachelard, Canguilhem, Foucault (tr B. Brewster) London: New Left Books.
LEIGH, Denis (1961) The Historical Development of British Psychiatry Vol. 1: 18th and 19th Century Oxford: Pergamon Press.
LENIN, Vladimir I. [1917](1964) Imperialism, the highest stage of capitalism. In Selected Works in Three Volumes, Vol. 3. London: Laurence and Wishart.
LEWIN, Karl (1935) A Dynamic Theory of Personality (tr D. K. Adams and K. E. Zener) New York: McGraw-Hill.
LEWIS, Jane (1980) The Politics of Motherhood London: Croom Helm.
LEWIS, Richard A. (1952) Edwin Chadwick and the Public Health Movement London: Longmans, Green and Company.
LIDDIARD, Mabel (1923) The Mothercraft Manual London: Churchill.
LIKERT, R. (1932) A technique for the measurement of attitudes. Archives of Psychology, No. 140.
LLEWELLYN-SMITH, Hubert (1892-7) The Influx of Population. In C. Booth, Life and Labour of the People in London, Vol. 3. London: Macmillan.
LOCKE, John. [1689](1920) An Essay Concerning Human Understanding London: Ward, Lock.
LOMBROSO, Cesare [1898](1911) Crime: Its Causes and Remedies (tr Henry P. Horton) Boston: Little, Brown.
LONG, Constance (1920) The Psychology of Phantasy London: Bailliere, Tindall and Cox.
LORD, John R. (ed) (1930) Report of the Proceedings of the Conference on Mental Health London: National Council for Mental Hygiene.
LOW, Barbara (1920) Psycho-analysis London: George Allen and Unwin.
LOWENFELD, Margaret (1935) Play in Childhood London: Gollanz.

LUCAS, Prosper (1847-50) Traite philosophique et physiologique de l'heredite naturelle. Paris: Corbeil.
LUDMERER, Kenneth M. (1972) Genetics and American Society: a Historical Appraisal Baltimore: Johns Hopkins University Press.
LUKES, Stephen (1975) Review of B. Barnes, Scientific Knowledge and Sociological Theory Social Studies of Science, 5, 501-505.

MACADAM, Elizabeth (1925) The Equipment of the Social Worker London: George Allen and Unwin.
MACADAM, Elizabeth (1934) The New Philanthropy London: Unwin Bros.
MACALPINE, Ida and HUNTER, Richard (1969) George III and the Mad Business London: Allen Lane.
McCALLUM, Catherine M. (1952) Child guidance in Scotland. British Journal of Educational Psychology, 22, 79-88.
McCLEARY, George F. (1935) The Maternity and Child Welfare Movement London: King.
MacCURDY, John T. (1923) Problems in Dynamic Psychology Cambridge: University Press.
MacCURDY, John T. (1925) The Psychology of Emotion, Morbid and Normal London: Kegan Paul.
McDOUGALL, William (1908) Introduction to Social Psychology London: Methuen.
McDOUGALL, William (1914) Psychology in the service of eugenics. Eugenics Review, 5. 295-308.
McDOUGALL, William (1920) Introduction to Social Psychology (15th edition) London: Methuen.
McDOUGALL, William (1923) An Outline of Psychology London: Methuen.
McDOUGALL, William (1926) An Outline of Abnormal Psychology Boston: Scribner.
McDOUGALL, William (1936) Psychoanalysis and Social Psychology London: Methuen.
M'GONIGLE, George C. M. and KIRBY, John (1936) Poverty and Public Health London: Gollancz.
McGREGOR, Oliver R. (1957) Divorce in England London: Heinemann.
MacNICOL, John (1980) The Movement for Family Allowances London: Heinemann.
MACKENZIE, Donald (1976) Eugenics in Britain. Social Studies of Science, 6, 499-532.
MACKENZIE, Donald (1981a) Statistics in Britain, 1865-1930: The Social Construction of Scientific Knowledge Edinburgh: Edinburgh University Press.
MACKENZIE, Donald (1981b) Interests, positivism and history. Social Studies of Science, 11, 498-504.
McMILLAN, Margaret (1930) The Nursery School London: J.M. Dent.
MAGNAN, Jacques J. V. (1876) On Alcoholism: the Varoous Forms of Alcoholic Delirium and their Treatment (tr W. S. Greenfield) London.
MALSON, Lucien (1972) Wolf Children London: New Left Books.
MALTHUS, Thomas [1798](1976) An Essay on the Principle of Population Harmondsworth: Penguin.
MANUEL, Frank (1972) From equality to organicism. In Freedom from History and Other Untimely Essays London: University of London Press.
MARSHALL, Alfred (1890) Principles of Economics. Vol. 1 London: Macmillan.
MARSHALL, John D. (1968) The Old Poor Law, 1795-1834 London: Macmillan
MARWICK, Arthur (1964) Middle opinion in the thirties: Planning, progress and political 'agreement'. English Historical Review, 79,

285-298.
MASSIEU, Jean (1815) Recueil des definitions et responses les plus remarquables de Massieu et Clerc (including English translation by J. H. Sivrae) London: Cox and Bayles.
MATTHEWS, Frank B. (1954) Mental Health Services London: Shaw and Sons.
MAUDSLEY, Henry (1868) The Physiology and Pathology of the Mind (2nd ed) London.
MAUDSLEY, Henry (1873) Body and Mind London: Macmillan.
MAUDSLEY, Henry (1874) Responsibility in Mental Disease London: King.
MAUDSLEY, Henry (1879) The Pathology of Mind London: Macmillan.
MAURICE, Frederick (1903) National health: a soldier's study. Contemporary Review, 83, 41-56.
MAY, Margaret (1973) Innocence and experience: the evolution of the concept of juvenile delinquency in the mid-nineteenth century. Victorian Studies, 17, 7-29.
MAYHEW, Henry (1861-2) London Labour and the London Poor 4 Vols. London: Griffin, Bohn.
MERCIER, Charles A. (1917) Moral imbecility. The Practitioner, 99, 301-308.
MERTON, Robert K. (1964) Social Theory and Social Structure (revised edition) London: Collier Macmillan.
MESURIER, L. Le (ed) (1935) A Handbook of Probation and Social Work of the Courts London: National Association of Probation Officers.
MEYNELL, Hugo (1977) On the limits of the sociology of knowledge. Social Studies of Science, 7, 489-500.
MILLARD, William (1864) The Idiot and his Helpers Colchester: Essex Hall Idiot Asylum.
MILLER, Emanuel (ed)(1937) The Growing Child and its Problems London: Kegan Paul, Trench and Trubner.
MILLER, Hugh Crichton (ed) (1920) Functional Nerve Disease: An Epitome of War Experience London: Oxford University Press.
MILLER, Hugh Crichton (1921) The New Psychology and the Teacher London: Jarrolds.
MILLER, Hugh Crichton (1922) The New Psychology and the Parent London: Jarrolds.
MILLER, Hugh Crichton (1929) The unconscious motive of the juvenile delinquent. Probation, 1, 12-14.
MILLSTONE, Erik (1978) A framework for the sociology of knowledge. Social Studies of Science, 8, 111-125.
MINSON, Jeffrey (1980) Strategies for socialists. Economy and Society, 9, 1-43.
MINSON, Jeffrey (1980) Review of Ignatieff: A Just Measure of Pain and Scull: Museums of Madness. Sociological Review, 28, 195-198.
MITCHELL, Juliet (1974) Psychoanalysis and Feminism London: Allen Lane.
MITCHELL, Thomas W. (1927) Problems in Psychopathology London: Kegan Paul.
MOODIE, William (1930) The Child Guidance Clinic. The Magistrate, 2, 391-192.
MOODIE, William (1931) Child Guidance by Team Work London: Child Guidance Council.
MOREAU (de Tours) Jacques J. (1830) De l'influence du physique relativement au disordre des facultes intellectuelles Paris.
MOREL, Benedict A. (1857) Traite des degenerescences physiques, intellectuelles et morales de l'espece humaine, et des causes qui produisent ces varietes maladies Paris.
MORGAN, C. D. and MURRAY, H. A. (1935) A method for investigating

fantasies: the Thematic Apperception Test. Archives of Neurology and Psychiatry, 34, 289-306.
MORRISON, William (1896) Juvenile Offenders London: T. Fisher Unwin.
MOSELEY, William W. (1838) Eleven Chapters on Nervous and Mental Complaints London: Simpkin, Marshall & Co.
MOTT, Frederick W. (1919) War Neuroses and Shell Shock Oxford: Oxford Medical Publications.
MOWAT, Charles Lock (1961) The Charity Organization Society 1869-1913 London: Methuen.
MUNSTERBERG, Hugo (1912) Psychology and Industrial Efficiency London: Constable.
MURPHY, Gardner (1928) An Historical Introduction to Modern Psychology London: Kegan Paul.
MURPHY, Gardner and KOVACH, Joseph K. (1972) An Historical Introduction to Modern Psychology (6th edition) London: Routledge and Kegan Paul.
MURRAY, Henry A. et al. (1938) Explorations in Personality New York: Oxford University Press.
MYERS, Charles S. (1911) The pitfalls of 'mental tests'. British Medical Journal, 1, 195.
MYERS, Charles S. (1918) Present Day Applications of Psychology London: Methuen.
MYERS, Charles S. (1920) Mind and Work London: University of London Press.
MYERS, Charles S. (1926) Industrial Psychology in Great Britain London: Jonathan Cape.

NATIONAL ASSOCIATION OF PROBATION OFFICERS (1929-1934) Probation: the Journal of the National Association of Probation Officers London.
NATIONAL COUNCIL FOR MENTAL HYGIENE (1924) First Report 1923-1924 London: National Council for Mental Hygiene.
NAVARRO, Vincente (1978) Class Struggle, the State and Medicine London: Martin Robertson.
NEALE, William Beaver (1840) Juvenile Delinquency in Manchester Manchester.
NEUGEBAUER, R. (1978) Treatment of the mentally ill in medieval and early modern England: a reappraisal. Journal of the History of the Behavioural Sciences, 14, 158-169.
NEWSHOLME, Arthur and KERR, James (1924) School Hygiene (16th edition) London: George Allen and Unwin.
NEWSON, John and NEWSON, Elizabeth (1974) Cultural Aspects of Childrearing in the English-speaking World. In M.P.M. Richards, ed, The Integration of a Child into a Social World London: Cambridge University Press.
NICOLL, H. Maurice (1917) Dream Psychology Oxford: Oxford Medical Publications.
NORTON, Bernard J. (1978) Karl Pearson and statistics: the social origins of scientific innovation. Social Studies of Science, 8, 3-34.

OATES, David W. (1928) An experimental study of temperament. British Journal of Psychology, 19, 1-30.
OATES, David W. (1929) Group factors in temperamental qualities.

British Journal of Psychology, 20, 118-136.
ORR, John Boyd (1936) Food, Health and Income London: Macmillan.
OWEN, David E. (1965) English Philanthropy, 1660-1960 Cambridge, Mass.: Harvard University Press.
OWEN, Grace M. (1977) The Development of Health Visiting as a Profession. In Grace M. Owen, ed, Health Visiting London: Balliere Tindall.

PAILTHORPE, Grace W. (1932) Studies in the Psychology of Delinquency: Medical Research Council Special Report No. 170. London: HMSO.
PALERMO, David S. (1971) Is a scientific revolution taking place in psychology. Science Studies, 1, 135-155.
PARGETER, William (1792) Observations on Maniacal Disorders Reading.
PARKINSON, James (1807) Observations on the Excessive Indulgences of Children, Particularly Intended to Show its Injurious Effects on their Health and the Difficulties it Occasions in their Treatment during Sickness London: Symonds et al.
PARKS, E. L. (1976) From Constabulary to Police Society. In W. J. Chambliss and M. Mankoff eds, Whose Law, What Order New York: Wiley.
PASQUINO, Pasquale (1978) Theatrum politicum. The genealogy of capital - police and the state of prosperity. Ideology and Consciousness, 4, 41-54.
PAST AND PRESENT SOCIETY (ed) (1978) The Roots of Sociobiology London: Past and Present Society.
PEARSON, Karl (1898) Mathematical contributions to the theory of evolution: On the law of ancestral heredity. Proceedings of the Royal Society, 62, 386-412.
PEARSON, Karl (1901) National Life from the Standpoint of Science London: A. & C. Black.
PEARSON, Karl (1904) On the laws of inheritance in man, II. Biometrika, 3, 131-190.
PEARSON, Karl (1914-1930) The Life, Letters and Labours of Francis Galton (3 vols.) Cambridge: Cambridge University Press.
PETERSON, Joseph (1925) Early Conceptions and Tests of Intelligence Yonkers, N.Y.: World Books.
PFISTER, Oscar (1917) Psychoanalytic Method (tr C. R. Payne) London: Kegan Paul.
PICKENS, Donald K. (1968) Eugenics and the Progressives Nashville: Vanderbilt University Press.
PINCHBECK, Ivy and HEWITT, Margaret (1973) Children in English Society, Vol. 2 London: Routledge and Kegan Paul.
PINEL, Phillipe (1798) Nosographie philosophique, ou la methode de l'analyse appliquee a la medicine Paris: Maradan.
PINEL, Phillipe [1801](1806) A Treatise on Insanity (tr D.D. Davis) London: Cadell and Davies.
PINSENT, Ellen F. (1903) On the permanent care of the feeble minded. The Lancet, 21.2.1903, 513-515.
PLATT, Anthony (1969) The Child Savers Chicago: University of Chicago Press.
POPPER, Karl [1934](1972) The Logic of Scientific Discovery London: Hutchinson.
POTTS, Patricia (1982) Medicine, morals and mental deficiency: the contribution of doctors to the institutionalisation of special education in England, 1890-1930. Unpublished paper given to the

Society for the Social History of Medicine Conference on Mental Handicap, 24.4.1982.
POYNTER, John R. (1969) Society and Pauperism London: Routledge and Kegan Paul.
POWERS, E. (1933) Matching Sketches of Personality with Script. In G.W. Allport and P.E. Vernon, Studies on Expressive Movement New York: Macmillan.
PREYER, W. [1882](1894) Mental Development in the Child(tr H. W. Brown) London: Arnold.
PRICHARD James C. (1835) A Treatise on Insanity London.
PRIDEAUX, D. (1921) Expression of emotion as shown by the psycho-galvanic reflex. British Journal of Medical Psychology, 2, 23-46.
PRITCHARD, David G. (1963) Education and the Handicapped 1760-1960 London: Routledge and Kegan Paul.
PROCACCI, Giovanna (1978) Social economy and the government of poverty. Ideology and Consciousness, 4, 55-72.
PROVINE, William B. (1971) The Origins of Theoretical Population Genetics Chicago: Chicago University Press.

RATHBONE, Eleanor (1924) The Disinherited Family London: Arnold.
RAVEN, Alice (1925) The use of psychology in social work. Charity Organization Quarterly, No 14, 251-255.
RAVEN, Alice (1929) An Introduction to Individual Psychology Cambridge: Heffer.
REES, John R. and ROBINSON, Doris (1930) Modern psychiatry and social work. In Hospital Almoners' Association Year Book, 1930, London.
RENAN, Ernest [1890](1923) L'avenir de la science (translated as The Future of Science, Boston: Roberts, 1891) Paris:Calmann-Levy.
RIBOT, Theodule A. [1873](1875) Heredity: A Psychological Study of its Phenomena, Laws, Causes and Consequences London: King.
RICARDO, David [1817](1951-73) The Principles of Political Economy and Taxation. In The Works and Correspondence of David Ricardo (ed, P. Sraffa) Vol.1. Cambridge: Cambridge University Press for the Royal Economic Society.
RICHARDS, Barry (1977) Psychology, prisons and ideology. Ideology and Consciousness, 2, 9-25.
RICHARDSON, Cyril A. (1922) Methods and Experiments in Mental Tests London: Harrap.
RICHARDSON, Cyril A. (1929) The measurement of conative factors in children and their influence. British Journal of Psychology, 19, 405-412.
RICHMOND, Mary E. (1917) Social Diagnosis New York: Russell Sage.
RIESE, Walther (1969) The Legacy of Phillipe Pinel New York: Springer.
RILEY, Denise (1979) War in the nursery. Feminist Review, 2, 82-108.
RIVERS, William H. R. (1920) Instinct and Unconscious Cambridge: University Press.
ROBINSON, Virginia P. 1930) A Changing Psychology in Social Casework Chapel Hill, Carolina: University of North Carolina.
ROOFF, Madeline (1972) A Hundred Years of Family Welfare London: Michael Joseph.
RORSCHACH, H. [1921](1942) Psychodiagnostics (tr P. Lemkau and B. Kronenberg) New York: Grove and Stratton.
RORTY, Richard (1980) Philosophy and the Miror of Nature Oxford:

Blackwell.
ROSE, Michael E. (1972) The Relief of Poverty 1834-1914 London: Macmillan.
ROSE, Nikolas (1977) Fetishism and ideology: a review of theoretical problems. Ideology and Consciousness, 2, 27-54.
ROSE, Nikolas (1980) Problems of genealogical analysis. Unpublished paper.
ROSEN, George (1946) The philosophy of ideology and the emergence of modern medicine in France. Bulletin of the History of Medicine, 20, 328-339.
ROSEN, George (1968) Madness in Society Chicago: University of Chicago Press.
ROSEN, Marvin; CLARK, Gerald and KIVITZ, Martin (eds) (1976) The History of Mental Retardation Baltimore: University Park Press.
ROSENBERG, Charles E. (1974) The bitter fruit: heredity, disease and social thought in nineteenth-century America. Perspectives in American History, 8, 189-235.
ROWNTREE, B. Seebohm (1901) Poverty. A Study of Town Life (1st edition) London: Macmillan.
ROWNTREE, B. Seebohm (1913) Poverty: A Study of Town Life (2nd edition) London: Nelson.
ROWNTREE, B. Seebohm (1914) The Way to Industrial Peace and the Problem of Unemployment London: T. Fisher Unwin.
RUSSELL, Charles (1900) The Jewish Question in the East End. In C. Russell & H.S. Lewis, eds, The Jew in London London.
RUSSELL, William O. (1819) A Treatise on Crimes and Misdemeanours (2 vols) London: Butterworth.
RYAN, Joanna and THOMAS, Frank (1980) The Politics of Mental Handicap London: Penguin.

SANDERS, Wiley B. (1970) Juvenile Offenders for a Thousand Years Chapel Hill, Carolina: University of Carolina Press.
SCHARLIEB, Mary (1927) Psychology of Childhood: Normal and Abnormal London: Constable.
SCHRAG, Peter and DIVOKY, Diane (1981) The Myth of the Hyperactive Child London: Penguin.
SCHUMPETER, Joseph A. (1954) History of Economic Analysis New York: Oxford University Press.
SCHWEINITZ, Karl De (ed)(1947) England's Road to Social Security 1349-1947 London: Oxford University Press.
SCULL, Andrew T. (1975) From madness to mental illness: medical men as moral entrepreneurs. Archives Europeenes de Sociologie, 16, 218-161.
SCULL, Andrew T. (1979) Museums of Madness: the Social Organisation of Insanity in 19th Century England London: Allen Lane.
SEARL, M. N. (1933) Play, reality and aggression. International Journal of Psychoanalysis, 14, 310-320.
SEARLE, Geoffrey R. (1971) The Quest for National Efficiency Oxford: Blackwell.
SEARLE, Geoffrey R. (1976) Eugenics and Politics in Britain 1900-1914 Leyden: Noordhoff International.
SEARLE, Geoffrey R. (1978) Past and Present Society, The Roots of Sociobiology. Proceedings of Conference held 29.9.78. Oxford: Past and Present Society.
SEDGWICK, Peter (1982) Psychopolitics London: Pluto.
SEGUIN, Edouard (1866) Idiocy and Its Treatment by the Physiological Method New York.

SEGUIN, Edouard (1870) New Facts and Remarks Concerning Idiocy New York.
SEGUIN, Edouard (1876) Report on Education. In R. H. Thurston, ed, Report of Commissioners to Vienna International Exhibition, 1873 Washington.
SEMMEL, Bernard (1960) Imperialism and Social Reform: English Social-Imperial Thought, 1895-1914 London: George Allen and Unwin.
SHADWELL, Arthur [1906](1909) Industrial Efficiency (2nd edition) London: Longmans.
SHAND, Alexander F. (1914) The Foundations of Character London: Macmillan.
SHAPIN, Steven (1975) Phrenological knowledge and the social structure of early nineteenth-century Edinburgh. Annals of Science, 32, 219-243.
SHAPIN, Steven and BARNES Barry (1979) Darwin and Social Darwinism: Purity and History. In B. Barnes and S. Shapin, eds, Natural Order: Historical Studies of Scientific Culture Beverley Hills & London: Sage.
SHARP, Stella E. (1899) Individual Psychology: a study in psychological method. American Journal of Psychology, 10, 329-391.
SHAW, George Bernard (ed) (1900) Fabianism and the Empire London: Fabian Society.
SHEE, George F. (1903) The deterioration in the national physique. Nineteenth Century, 53, 797-805.
SHELDON, William H. with STEVENS, S. S. (1942) The Varieties of Temperament: A Psychology of Constitutional Differences New York: Harper.
SHINN, Milicent (1893) Notes on the Development of a Child University of California Studies.
SHRUBSALL, F. C. (1923) Delinquency and mental defect. British Journal of Medical Psycholgoy, 3, 179-187.
SHRUBSALL, F. C., (1927) Notes on the investigation and treatment of 'difficult' children in the United States of America. Mental Welfare, 8, 41-48.
SHUTTLEWORTH, George E. (1888) The education of children of abnormally weak mental capacity. Journal of Mental Science, 34, 80-84.
SIDNEY, Edwin (1854) Teaching the Idiot London: Society for the Encouragement of Arts, Manufacture and Commerce.
SIMON, Brian (1974) The Politics of Educational Reform London: Lawrence and Wishart.
SIMON, Brian (1971) Intelligence, Psychology and Education London: Lawrence and Wishart.
SIMON, Brian (1978) Classification and Streaming. In Intelligence, Psychology and Education (revised edition) London: Lawrence and Wishart.
SIMPKINS, Mike (1979) Trapped Within Welfare London: Macmillan.
SINCLAIR, John (1791-1799) The Statistical Account of Scotland (21 vols.) Edinburgh.
SKULTANS, Vieda (1975) Madness and Morals London: Routledge and Kegan Paul.
SKULTANS, Vieda (1979) English Madness London: Routledge and Kegan Paul.
SMITH, Adam [1776](1976) An Inquiry into the Nature and Causes of the Wealth of Nations (ed R. H. Cambell and A.S. Skinner) (2 vols.) London: Oxford University Press.
SMITH, Maurice Hamblin (1924) The medical examination of delinquents. Howard Journal, 1, 115-121.
SMITH, Maurice Hamblin (1922) The Psychology of the Criminal

London: Methuen.
SMITH, Roger (1981) Trial by Medicine: Insanity and Responsibility in Victorian Trials Edinburgh: Edinburgh University Press.
SMITH, Walter Whately (1922) The Measurement of Emotion London: Kegan Paul.
SPEARMAN, Charles (1904) 'General Intelligence': objectively determined and measured. American Journal of Psychology, 15, 201-292.
SPEARMAN, Charles (1915) The measurement of intelligence. Eugenics Review, 6, 312-313.
SPENCER, Herbert (1972) On Social Evolution (ed J.D.Y. Peel) Chicago: Chicago University Press.
SPURZHEIM, Johann G. (1817) Observation on the Deranged Manifestations of the Mind or Insanity London: Baldwin, Craddock and Joy.
STARK, Werner (1958) The Sociology of Knowledge London: Routledge and Kegan Paul.
STERN, William [1912] (1914) The Psychological Methods of Testing Intelligence (tr G. M. Whipple) Baltimore: Warwick and York.
STERN, William (1914) Psychologie der fruhen kindheit Leipzig: Quelle und Meyer.
STERN, William [1935](1938) General Psychology from the Personalistic Standpoint (tr H. D. Spoerl) New York: Macmillan.
STEUART, James [1767](1966) An Inquiry into the Principles of Political Oeconomy (ed A.S. Skinner), 2 vols. Edinburgh: Oliver and Boyd.
STEVENSON, George S. and SMITH, Geddes (1934) Child Guidance Clinics: A Quarter Century of Development New York: Commonwealth Fund.
STODDART, W. H.B. (1923) Delinquency and mental defect. British Journal of Medical Psychology, 3, 188-193.
STRACHEY, J. St. Loe (1926) American juvenile courts and children's courts in England. The Magistrate, 1, 117-118.
SULLY, James (1886) Teacher's Handbook of Psychology London: Longman.
SULLY, James (1895) Studies of Childhood London: Longmans, Green.
SUTHERLAND, Gillian (1977) The magic of measurement: mental testing and English education, 1900-1940. Transactions of the Royal Historical Society, 27, 135-153.
SUTHERLAND, Gillian (1981) Measuring Intelligence: English Local Authorities and Mental Testing, 1919-1939. In C. Webster, ed, Biology, Medicine and Society: 1840-1940, Cambridge: Cambridge University Press.
SUTHERLAND, Gillian and SHARP, Stephen (1980) 'The fust official psychologist in the wurrld': aspects of the professionalisation of psychology in early twentieth century Britain. History of Science, 17, 181-208.
SZASZ, Thomas S. (1972) The Myth of Mental Illness London: Paladin.
SZASZ, Thomas S. (1973) The Manufacture of Madness London: Paladin.

TALBOT, Eugene S. (1898) Degeneracy: Its Causes, Signs and Results London: Scott.
TANSLEY, Arthur G. (1920) The New Psychology and its Relation to Life London: Allen and Unwin.
TAVISTOCK CLINIC (1928)(1929 etc) Report for the Years 1920-1927 (1927-1929 etc) London: Tavistock Clinic.
TEMKIN, Oswei (1963) The Scientific Approach to Disease: Specific

Entity and Individual Sickness. In A.C. Crombie, ed, Scientific Change London: Heinemann.
THOMSON, Godfrey H. (1922) The Northumberland Mental Tests London: Harrap.
THORNDIKE, Edward L. (1935) The Psychology of Wants, Interests and Attitudes New York: Appleton-Century.
THURSTONE, Louis L. (1931) The measurement of change in social attitudes. Journal of Social Psycholgoy, 2, 230-235.
TIMMS, Noel (1964) Psychiatric Social Work in Great Britain, 1929-1962 London: Routledge and Kegan Paul.
TITCHENER, Edward B. (1901-1905) Experimental Psychology, 2 vols., London: Macmillan.
TOLMAN, Edward C. (1932) Purposive Behaviour in Animals and Man New York: Appleton Century.
TOMLINSON, Jim (1981) Problems of British Economic Policy, 1870-1945 London: Methuen.
TREDGOLD, Alfred F. (1908) Mental Deficiency (Amentia) London: Balliere, Tindall and Cox.
TREDGOLD, Alfred (1910) The feeble-minded. Contemporary Review, 97, 717-727.
TREDGOLD, Alfred F. (1914) Mental Deficiency (Amentia) (2nd edition) London: Balliere, Tindall and Cox.
TREDGOLD, Alfred F. (1917) Moral Imbecility. The Practitioner, 99, 43-55.
TRIBE, Keith (1978) Land, Labour and Economic Discourse London: Routledge and Kegan Paul.
TURGOT, Robert J. [1788](1793) Reflections on the Formation and Distribution of Wealth London: Good.
TROTTER, Wilfred (1916) Instincts of the Herd in Peace and War London: Fisher Unwin.
TUKE, David Hack (1882) Chapters in the History of the Insane in the British Isles London: Kegan Paul.
TUKE, Daniel Hack, (ed) (1892) A Dictionary of Psychological Medicine (2 vols) London: Churchill.
TUKE, Samuel [1813](1964) Description of the Retreat London: Dawsons.

UNDERWOOD, Michael (1797) A Treatise on the Disorders of Childhood Adapted to Domestic Use (3 vols) London.

VALENTINE, C. W. (1929) The relative reliability of men and women in instinctive judgments of character. British Journal of Psychology, 19, 213-238.
VERNON, Philip E. (1929) Tests of temperament and personality. British Journal of Psychology, 20, 97-118.
VERNON, Philip E. (1933a) The American and the German methods of approach to the study of temperament and personality. British Journal of Psychology, 24, 156-177.
VERNON, Phillip E. (1933b) The Rorschach inkblot test. British Journal of Medical Psychology, 13, 89-118, 179-205 and 271-295.
VORZIMMER, Peter (1963) Charles Darwin and blending inheritence. Isis, 54, 371-390.

WALLIS, Roy (ed) (1979) On the Margins of Science: The Social Construction of Rejected Knowledge Sociological Review Monograph No. 27. Keele, Staffs: University of Keele.
WARNER, Francis (1888) A method of examining children in schools as to their development and brain condition. British Medical Journal, 22nd September 1888, 659-660.
WARNER, Francis (1890) Lectures on Mental Faculty Cambridge: Cambridge University Press.
WARNER, Francis (1895) Report on the Scientific Study of the Mental and Physical Conditions of Childhood, with particular reference to Children of Defective Constitution and with Recommendations as to Education and Training London: Royal Sanitary Institute.
WARNER, Francis (1896) Mental and physical conditions among fifty thousand children. Journal of the Royal Statistical Society, 59, 125-162.
WARNER, Francis (1897) The Study of Children and their School Training London: Macmillan.
WARREN, Charles (1901) Some lessons from the South African War. National Review, 38, 181-196.
WARREN, Neil (1971) Is a scientific revolution taking place in psychology? Doubts and reservations. Science Studies, 1, 407-413.
WATKINS, C. Ken (1975) Social Control London: Longman.
WEBB, Edward J. (1915) Character and Intelligence. British Journal of Psychology Monograph Supplement 3. Cambridge: Cambridge University Press.
WEBB, Sidney (1907) The Decline in the Birth Rate Fabian Tract No 131 London: Fabian Society.
WEBB, Sidney (1910) Eugenics and the Poor Law: the minority report. Eugenics Review, 2, 233-241.
WEBSTER, Charles (ed) (1981) Biology, Medicine and Society: 1840-1940 Cambridge: Cambridge University Press.
WEEKS, Jeffry (1971) Sex, Politics and Society London: Longmans.
WEIMER, Walter B. (1979) The history of psychology and its retrieval from historiography. Parts I and II. Social Studies, 4, 235-258 and 367-396.
WEIMER, Walter B. and PALERMO, David S. (1973) Paradigms and normal science in psychology. Science Studies, 3, 211-244.
WEISMANN, August (1893) The Germ Plasm: A Theory of Heredity New York: Scribner.
WELCH, Henry J. and MYERS, Charles S. (1932) Ten Years of Industrial Psychology London: Pitman.
WEST, Charles (1854) Lectures on the Diseases of Infancy and Childhood (3rd edition) London: Longman.
WHITEBREAD, Nanette (1972) The Evolution of the Infant-Nursery School: A History of Infant and Nursery Education in Britain, 1800-1970 London: Routledge and Kegan Paul.
WHITE, Arnold (1886) The Problems of a Great City London: Remington.
WHITE, Arnold (1892) The Destitute Alien in Great Britain London: Swann Sonnenschein & Co.
WHITE, Arnold (1901) Efficiency and Empire London: Methuen.
WILLIAMS, J. H. Harley (1932) A Century of Public Health in Britain, 1832-1929 London: Black.
WILLIAMS, Karel (1972) Problematic history. Economy and Society, 1, 457-481.
WILLIAMS , Karel (1975) Facing reality: a critique of Karl Popper's empiricism. Economy and Society, 4, 309-358.
WILLIAMS, Karel (1981) From Pauperism to Poverty London: Routledge and Kegan Paul.

WILLIS, Thomas (1672) De Anima Brutorum London.
WILSON, Bryan (ed)(1970) Rationality Oxford: Blackwell.
WINNICOTT, Donald W. (1975) Through Pediatrics to Psychoanalysis London: Hogarth Press.
WINSLOW, Forbes (1854) Lettsomian Lectures on Insanity London: Churchill.
WISSLER, Clark (1901) The correlation of mental and physical tests. Psychological Review Monograph Supplements, 3.
WOLF, Theta H. (973) Alfred Binet Chicago: University of Chicago Press.
WOLFENSBERGER, Wolf (1976) The Origin and Nature of our Institutional Models New York: Human Policy Press.
WOODROOFE, Kathleen (1962) From Charity to Social Welfare in England and the United States London: Routledge and Kegan Paul.
WOODWORTH, Robert S. (1918) Dynamic Psychology New York: Columbia University Press.
WOODWORTH, Robert S. (1919) Personal Data Sheet (Psychoneurotic Inventory) Chicago: Stoelting.
WOOLGAR, Steve (1981) Interests and explanations in the social study of science. Social Studies of Science, 11, 365-394.
WORMWALD, John and WORMWALD, Samuel (1913) A Guide to the Mental Deficiency Act, 1913 London: P.S. King.
WUNDT, William [1896](1897) Outlines of Psychology (tr C.H. Judd) London: Macmillan.

YELLOLY, Margaret A. (1980) Social Work Theory and Psychoanalysis New York: Van Nostrand Reinhold.
YOUNG, Agnes, F. and ASHTON, Elwyn T. (1956) British Social Work in the 19th century London: Routledge and Kegan Paul.
YOUNG, Robert M. (1970) Mind, Brain and Adaptation in the Nineteenth Century: Cerebral Localisation and its Biological Context from Gall to Ferrier Oxford: Clarendon Press.
YOUNGHUSBAND, Eileen (1947) Report on the Employment and Training of Social Workers Edinburgh: Carnegie UK Trust.
YOUNGHUSBAND, Eileen (1951) Social Work in Britain Edinburgh: Carnegie UK Trust.
YOUNGHUSBAND, Eileen (1978) Social Work in Britain: 1950-1975 (vol 1) London: George Allen and Unwin.

ZILBOORG, Gregory (1941) History of Medical Psychology New York: Norton.

OFFICIAL PUBLICATIONS

BOARD OF CONTROL (1918) Fourth Annual Report(for the year 1917) London: HMSO.

BOARD OF CONTROL (1931) Colonies for Mental Defectives London: HMSO.

BOARD OF CONTROL (1934) Report of the Departmental Committee on Sterilisation, Cd. 4485 [The Brock Committee] London: HMSO.

BOARD OF EDUCATION (1905) Report of the Inter-Departmental Committee on Medical Inspection and Feeding of Children attending Public Elementary Schools London: HMSO.

BOARD OF EDUCATION (1910)(1911 etc) Annual Report for the Chief Medical Officer of the Board of Eduction for 1908 (1909 etc) London: HMSO.

BOARD OF EDUCATION (1920) Report of the Juvenile Organizations Committee on Juvenile Delinquency London: HMSO.

BOARD OF EDUCATION (1924) Report of the Consultative Committee on Psychological Tests of Educable Capacity and their Possible Uses in the Public System of Education London : HMSO.

BOARD OF EDUCATION AND BOARD OF CONTROL (1929) Report of the Joint Departmental Committee on Mental Deficiency [The Wood Committee]; 3 vols. London: HMSO.

DEPARTMENT OF EDUCATION AND SCIENCE (1975) The School Health Service 1908-1974 London: HMSO.

EDUCATION DEPARTMENT (DEFECTIVE AND EPILEPTIC CHILDREN)(COMMITTEE) Vol.I: Report Cd. 8746; Vol.II: Minutes of Evidence Cd. 8747. London: HMSO.

HOME OFFICE (1895) Report from the Departmental Committee on Prisons C. 7702. London:HMSO.

HOME OFFICE (1923)(1924, 1925, 1928, 1938) First (Second, Third etc) Report on the Work of the Children's Branch London: HMSO.

HOME OFFICE (1927) Report of the Departmental Committee on the Treatment of Young Offenders Cmd. 2831. London: HMSO.

HOME OFFICE (1932) Report of the Departmental Committee on Persistent Offenders London: HMSO.

HOME OFFICE (1946) Training in Child Care Interim Report of the Care of Children Committee [Chairman, Myra Curtis]. London: HMSO.

LOCAL GOVERNMENT BOARD (1904) Report of the Inter-Departmental Committee on Physical Deterioration 3 vols. Cd. 2175. London: HMSO.

LOCAL GOVERNMENT BOARD (1910) Supplement to Report of Medical Officer on Infant and Child Mortality Cd. 5263. London: HMSO.

MINISTRY OF EDUCATION (1955) Report of the Committee on Maladjusted Children [Chairman, J. Underwood]. London: HMSO.

MINISTRY OF HEALTH (1919) An Outline of the Practice of Preventive Medicine A memorandum by Sir George Newman, Chief Medical Officer, Ministry of Health. Cmd. 363. London: HMSO.

POOR LAW COMMISSION (1834) Report from His Majesty's Commisioners for Inquiry into the Administration and Practical Operation of the Poor Laws. London: HMSO.

POOR LAW SCHOOLS (COMMITTEE) (1896) Report of the Departmental Committee appointed by the Local Government Board to Inquire into the Poor Law Schools 3 vols. C. 8027, C. 8032 and C. 8033. London: HMSO.

ROYAL COMMISSION ON THE BLIND, DEAF AND DUMB. (1889) Report, 4 vols. C. 5781. London: HMSO.

ROYAL COMMISSION ON ALIEN IMMIGRATION (1903) Report Cd. 1743. London: HMSO.

ROYAL COMMISSION ON THE CARE AND CONTROL OF THE FEEBLE MINDED (1908) Vols. I - IV: Minutes of Evidence Cd. 4215, 4216, 4217, 4218; Vol. V: Appendix Papers Cd 4219; Vol. VI: Reports on Medical Investigations Cd. 4220; Vol. VII: Report on Visit of Certain Commissioners to America Cd. 4221; Vol. VIII: Report Cd. 4202. London: HMSO.

ROYAL COMMISSION ON THE POOR LAWS AND RELIEF OF DISTRESS (1909) Report Cd. 4499. London: HMSO.

ROYAL COMMISSION ON LUNACY AND MENTAL DISORDER (1929) Report Cmd. 2700. London: HMSO.

WAR OFFICE (1922) Report of the Committee of Enquiry into 'Shell Shock' London: HMSO.